

2020

Employee flourishing: The application and efficacy of workplace coaching as a methodology for improving mental well-being

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<http://hdl.handle.net/10026.1/16610>

<http://dx.doi.org/10.24382/575>

University of Plymouth

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**UNIVERSITY OF
PLYMOUTH**

**EMPLOYEE FLOURISHING: THE APPLICATION AND EFFICACY OF
WORKPLACE COACHING AS A METHODOLOGY FOR IMPROVING
MENTAL WELL-BEING**

by

ALISON LEIGH SYDENHAM

A thesis submitted to the University of Plymouth
in partial fulfilment for the degree of

DOCTOR OF PHILOSOPHY

Plymouth Business School

October 2020

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Acknowledgements

My journey through this PhD would not have been possible without the support, encouragement and love from several people who have made this possible, I am eternally grateful to everyone who has helped me along the way. My first acknowledgement is to the participants who took part in the research, many of whom gave six months to participate in the coaching programme, completed numerous forms and were there from beginning to end, thank you for your belief in the power of coaching and for those who were new to coaching, thank you for your open-mindedness. This achievement would not have been possible in particular without two people: Sally and Rob, with their support and encouragement my research became a reality, thank you.

Secondly, I would like to offer grateful thanks to my Supervisory team, Dr Smita Tripathi and Beryl Badger who have provided expert, thoughtful and constructive guidance throughout the whole journey. No matter how small my progress, they always helped me achieve my goals, provided unwavering support, encouragement and responded to my needs. Smita, Beryl, it has been a joy working with you, next coffee on me!

Shortly after starting my PhD, I became pregnant and with it came new challenges. I didn't start my studies with the idea that everyone around me would have to make compromises but there have been countless occasions where my family and friends supported me in meeting yet another deadline, even attending lectures two weeks after giving birth and my Husband looking after our baby in the next room. I feel so blessed to have such a wonderfully supportive and loving family who gave me the time to complete my studies, instilled the belief that I could achieve it and faith that it was all going to be worthwhile. In particular, Mum, Dad, thank you for your love, encouragement and giving me this opportunity. Gary, you have held everything together so that I could put my studies first, thank you from the bottom of my heart, I love you. Barb, Ken, thank you for all the times you looked after Evelyn while I was studying, and never questioning why. I am also so grateful to every coaching client I have worked with, you have shared your lives with me and helped me to learn and grow.

Finally, I want to thank my daughter, Evelyn. You have changed my life and given me a true sense of well-being. I dedicate this thesis to you in the hope that one day you will take pleasure in the wonderfully indulgent experience of learning, strive to achieve your dreams and recognise what is important in life.

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Author's Declaration

At no time during the registration for the degree of Doctor of Philosophy has the author been registered for any other University award without prior agreement of the Doctoral College Quality Sub-Committee.

Work submitted for this research degree at the University of Plymouth has not formed part of any other degree either at the University of Plymouth or at another establishment.

Word count of main body of thesis: 85,395

A handwritten signature in blue ink, appearing to read 'A. Sydd', with a long horizontal flourish extending to the right.

Signed:

Date: 23 June 2020

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Abstract

Name: Alison Leigh Sydenham

Title: Employee Flourishing: The application and efficacy of workplace coaching as a methodology for improving mental well-being

The literature concerning the well-being of the working age population demonstrates that being in good work supports health and mental well-being. However, there is a lack of preventative measures to facilitate this in spite of growing research into the measures and determinants of well-being. This thesis highlights the growing literature on the benefits of coaching and sought to determine the efficacy of workplace coaching as a methodology for improving mental well-being through addressing three key areas identified as gaps within the literature: Does participants' well-being change as a result of a workplace coaching intervention; What changes to mental well-being occur as a result of workplace coaching; What are the contributing processes and causal mechanisms of workplace coaching?

A critical realist, mixed methods research design was adopted which involved three phases of participants (n=47) who undertook either a coaching/training programme; workplace coaching; or no intervention (control). Analysis of the results demonstrated a significant improvement in the well-being of participants compared to the control group across a number of well-being outcomes, particularly that coaching had a direct positive influence on personal, physical and emotional well-being; resilience and self-efficacy, autonomy and engagement, and it is further suggested that there is a positive relationship between well-being and those working/ volunteering as a coach.

The critical realist methodology enabled a retroductive approach to data analysis and identified the causal mechanisms of coaching. This explained that supportive challenge; listening skills; professional conversation; space; time and location of the coaching were all important factors that contributed towards well-being outcomes. The process of coaching was also identified along with the mediators of coaching (wellbeing recognition; perspective; goal clarity; resilience and self-efficacy; and motivation). Together these findings offer an explanation of the efficacy of coaching for mental well-being outcomes.

Overall, the findings of this thesis make an original contribution to theory, literature and professional practice, in particular that there is a positive link between workplace coaching and mental well-being and that there are specific underlying causal mechanisms which impact on these outcomes. Two coaching models are proposed that can guide evidence-based coaching practice; these identify a coaching process that contributes to well-being outcomes, along with highlighting the underlying causal mechanisms and specified well-being outcomes that may be achieved through coaching.

Key words: *mental well-being; workplace coaching; coaching efficacy; coaching mediators; coaching outcomes; flourishing; happiness.*

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Chapter 1. Introduction

“The journey of a thousand miles begins with one step”.
(Lao Tzu)

1.0 Background

“Achieving well-being has been the concern of philosophers since Aristotle, and is, in many respects the essence of human existence” (Michaelson et al., 2009, p. 8).

Good mental well-being is crucial in order for people, communities, businesses and societies to survive and flourish. 4.2 million people in the UK reported low levels of happiness (Office for National Statistics, 2019b) and 12.8 million working days were lost in Britain in 2018/19 due to work-related stress, depression or anxiety (Health and Safety Executive (HSE), 2019). The health and well-being of the working age population is a particular key area; it is now widely recognised that being in work is good for health and mental well-being, while being out of work can lead to poorer physical health and an increased risk of developing mental health problems (Black, 2008).

2008 represented a fundamental shift in the way Governments and organisations viewed health. With the publication of the seminal paper “Working for a healthier tomorrow” (Black, 2008), Dame Carol Black working as Minister for Work and Health, highlighted the critical importance of improving the health of the working population. She suggested there was a significant opportunity to secure increased social justice and higher economic growth by taking a preventative

approach to mental health in order to reduce absence from work and improve the health of the nation.

At the same time, the Chief Scientist in the Government Office for Science in the Department of Business, Innovation and Skills initiated the Foresight Project on Mental Capital and Well-being (Government Office for Science, 2008), a significant research project involving 85 science reviews and over 300 academics globally. It considered evidence for factors that influence an individual's mental development and well-being and highlighted the strategic importance of a society which *flourishes*, i.e. that people would refer to their experience of life as "*going well*" (Huppert and So, 2011, p.838). This project resulted in a number of recommendations presented to the Government in 2008 to enhance mental well-being and minimise the depletion of mental capital.

The reports above are based upon an evidence-based shift in the current psychological research which further highlights a move away from dysfunction and ill-health towards positive mental well-being (e.g. Diener, 1984; Kahneman, 1999; (Seligman, 2018; Seligman, 2002; Seligman, Rashid, and Parks, 2006). Positive mental well-being (synonymous with the term *flourishing*) has been firmly established as a key concern for business and societal progress and paved the way for further researchers and policy makers to continue this debate (e.g. Helliwell, Layard, and Sachs, 2016; Huppert, 2008; Layard, Clark, Cornaglia, Powdthavee, and Vernoit, 2014). Even today, politicians are debating the importance of well-being in relation to economic growth. Reporting in the Guardian on 24 May 2019, Gus O'Donnell (previously cabinet secretary to three

prime ministers) launched a report urging a “*sea change in thinking from ministers*”, he said “*personal well-being rather than economic growth should be the primary aim of government spending...Britain could lead the world by making well-being the goal of government policy*” (Partington, 2019).

1.1 Measurement of well-being

The increasing recognition of well-being has been accompanied by an interest in the measurement of current levels of well-being. The New Economics Foundation (NEF) set out a radical proposal to guide the direction of modern societies and the lives of people who live in them. In contrast to the research carried out previously focusing narrowly on economic indicators, the NEF called for Governments to directly and regularly measure people’s “*subjective well-being i.e. their experiences, feelings and perceptions of how their lives are going*” as a new way of assessing societal progress (Michaelson, Abdallah and Steuer, 2009, p. 2). In November 2010, the Office for National Statistics (ONS) set up a Measuring National Well-being Programme which monitors and reports progress on these measures. In February 2019, for the first time, they brought together personal and economic well-being to understand the extent to which economic growth brings benefits to different groups in society (Office for National Statistics, 2019a). In addition to the ONS measurements, the European Social Survey (ESS) have also been measuring headline indicators of well-being every two years since 2002 with more in-depth “rotating modules” on well-being in 2006/7 and 2012/13.

The recognition of the importance of measuring well-being as an indicator of societal progress presents a continuing pathway for further research and demonstrates whether progress is being made with the well-being of a country's citizens. Interestingly, there is yet to be published within the ESS the difference to well-being score in order to demonstrate whether there has been a change along with considering the contributing factors, as highlighted in their topline series results: *"Further, comparisons using the data collected for the Personal and Social Wellbeing module included in Round 3 of the ESS would also represent a worthwhile study, to assess how patterns of wellbeing may have changed over time."* (European Social Survey, 2015). By contrast, the ONS have focused on this point and note that personal wellbeing measures are demonstrating very little change over the past 12 months, slightly higher happiness ratings, but about 4.2 million people reporting very low levels of happiness. (ONS, 2019a). It is worth noting that since they started recording levels of wellbeing, there has been a gradual increase since 2012 (see fig 1):

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

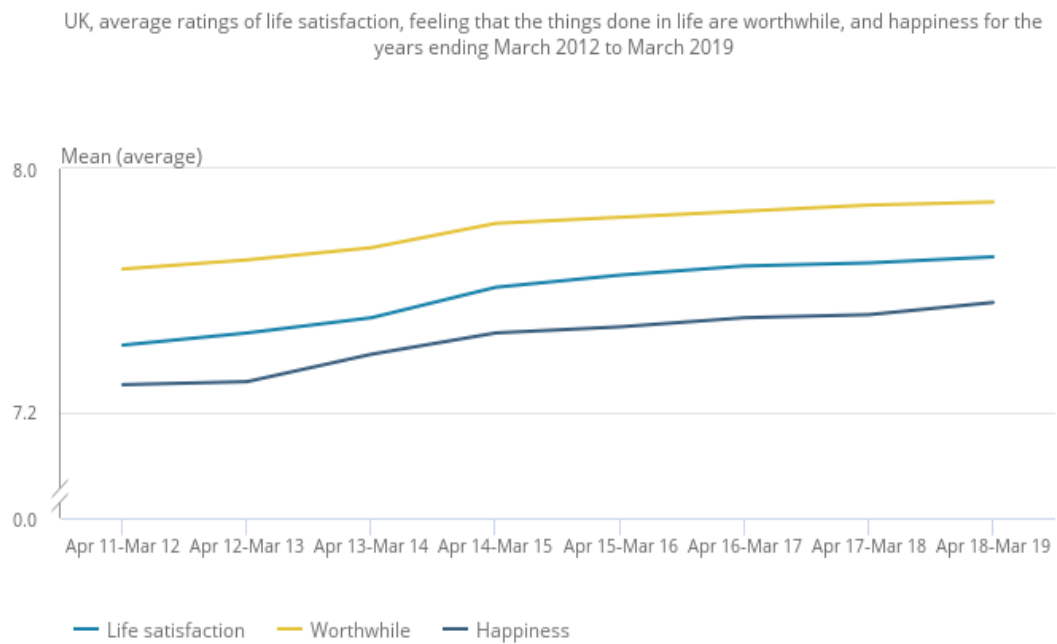


Figure 1: ONS Ratings of life satisfaction, worthwhile and happiness 2012-19 (Office for National Statistics, 2019a)

The research presented within this thesis builds on existing research by furthering the well-being debate in considering the change to mental well-being along with the factors that impact upon it, specifically by determining the efficacy of workplace coaching as a methodology for improving mental well-being. Efficacy is defined as “*the ability to produce a desired or intended result*” (Efficacy | Definition of Efficacy by Lexico, 2020)

1.2 Benefits of high levels of well-being

The outcome of these fundamental reports and increasing evidence base has meant that interest in health and well-being has continued to grow and a substantial business case is made for investing in well-being, especially the well-being of people in work. The headline benefits from the reports discussed above are summarised in Fig. 2 which focuses specifically on flourishing employees and

indicates the substantial ripple effects and benefits of harnessing the well-being of the working age population.



Figure 2: The main benefits from increasing the well-being of employees (© Sydenham, 2020)

The benefits from increasing the well-being of employees are also highlighted by the Chartered Institute of Personnel and Development (CIPD) who champion well-being through businesses. They suggest that well-being is a dynamic process and emerges from the way people interact with the world around them and that businesses should have an integrated approach to health and well-being at the core of how it carries out its activities and fulfils its mission. Furthermore, that supporting well-being will result in a healthy workplace with an engaged and productive workforce (Suff, 2019):

“Promoting and supporting employee well-being is at the heart of our purpose to champion better work and working lives because an effective workplace well-being programme can deliver mutual benefit

to people, organisations, economies and communities. When people are happy and well, businesses can thrive and societies flourish. We believe that work should do more than meet our basic financial needs and contribute to economic growth; it should also improve the quality of our lives by giving us meaning and purpose and contributing to our overall well-being” (Suff, 2019, p.1).

This means that well-being is not only about the benefits to the individual, there are far-reaching implications of raising levels of well-being, not least of which, that happy people = happy workplaces. However, workplaces have traditionally given priority to health, safety and reducing stress, especially in light of high levels of stress, depression and anxiety in the workplace (see Fig. 3).

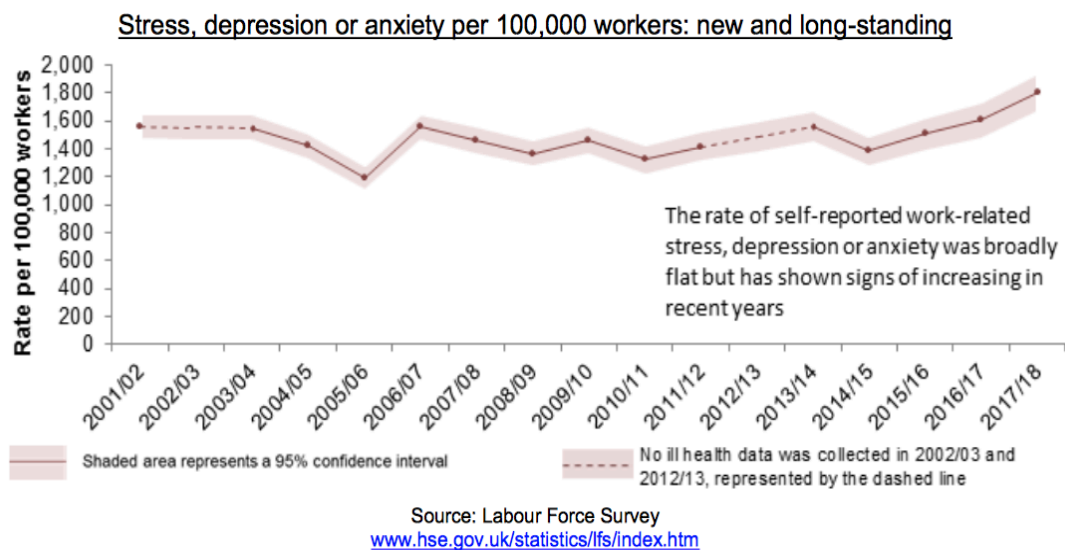


Figure 3: stress, depression or anxiety statistics 2001-2018. Source, Buckley (2018)

This means that the full benefits from employee well-being are not being realised. The CIPD Health and Well-being report (CIPD, 2019b) sets out the findings of analysis on health, well-being and absences of 1,078 organisations across the UK covering 3.2million employees. They note that while organisations have increased their focus on mental health, they are “falling short” of the required efforts to enhance well-being:

“there is still a lack of preventative measures being taken and despite employers’ efforts we are still seeing a worrying increase in poor mental health and work-related stress. This indicates that the steps taken by employers are falling short of what’s needed. Overall, organisations still tend to take a reactive approach to well-being, rather than a pre-emptive one that aims to create the kind of working environment that supports good well-being and helps to prevent poor health where possible.” (CIPD, 2019b, p. 8)

This short-fall from organisations is recognised within this PhD which is aiming to focus pro-actively on well-being and which ultimately also aims to result in the wider benefits of flourishing employees.

1.3 Well-being at work

The Foresight Mental Capital and Wellbeing Project (2008) highlighted that over £100 billion was spent in the UK on mental ill-health and the cost to UK plc was £27 billion for presenteeism, sickness absence and labour turnover (Dewe and Kompier, 2008). However, over the past decade, more attention has been given to proactive measures that reduce sickness absence and raise employee engagement. Enhancing well-being at work has been key in this movement with workplaces recognising not only the cost of sickness absence, low engagement and presenteeism, but also the advantages of a workforce high in well-being. *“In workplaces that are set up to foster well-being, people tend to be more creative, more loyal, more productive, and perform better in terms of customer satisfaction.”* (Jeffrey et al., 2014, p. 14). It has also been linked to higher engagement (Macleod and Clarke, 2009).

Waddell and Burton (2006) suggested *“There are economic, social and moral arguments that work is the most effective way to improve the well-being of*

individuals, their families and their communities (p.vii). They also presented a seminal argument about well-being at work and asked: *“Is work good for your health and well-being?”* (Waddell and Burton, 2006, p.vii). Their review found that (good) work is good for health and well-being, which might include: safety; fair pay; job security; personal fulfilment and development; control/autonomy; job satisfaction; good communication; supportive and non-discriminatory; and social gradients in health (Waddell and Burton, 2006). Added to this, Black (2008) suggested that it is necessary to shift attitudes to ensure that both employers and employees *“recognise not only the importance of preventing ill-health, but also the key role the workplace can play in promoting health and well-being”* (Black, 2008, p.10).

Alongside the increased understanding of the important role of workplaces in supporting the well-being of employees, has been a growing evidence base discussing factors that contribute to “workplace well-being”. For example, the CIPD published a report suggesting five evidence-based domains of well-being (health; work; values/principles; collective/social; personal growth) (Suff, 2016). Added to this, the HSE Management Standards provide guidance on activities to support employers in reducing stress-related sickness absence. Furthermore, there is supporting evidence for the crucial role of the line managers in ensuring well-being and positive mental health in the workplace (e.g. CIPD, 2020; Stevenson and Farmer, 2017; Lewis and Donaldson-Fielder, 2011; Nice, 2009). Yet, each of these places the emphasis heavily on the responsibility of the employer, the workplace programmes that support well-being and the wider organisational strategies that integrate well-being into daily activity. Whilst these

activities have been demonstrated to impact employee well-being, for example poorly designed job roles, they don't directly tell us how to improve employee well-being so that employees flourish. The research undertaken for this Ph.D. is located within well-being in the workplace but instead of focusing on the factors in the workplace that impact on employee well-being, it focuses specifically on the individual factors of employee flourishing, those that the employee tends to have control over themselves and are driven by the employee rather than the organisation.

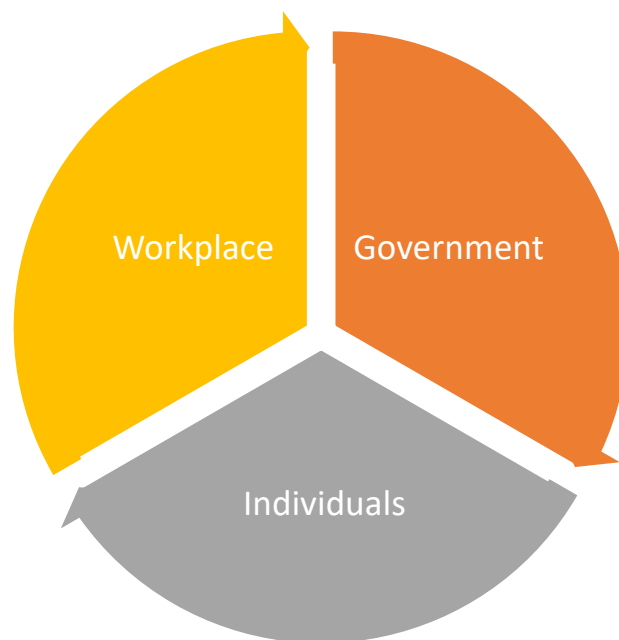


Figure 4: Responsibility for well-being (© Sydenham, 2020)

The Fig. 4 above suggests that responsibility lies not only with Government and workplaces, but also the individual. Placing further emphasis on individuals to take responsibility for their well-being may complement existing initiatives and bring to light evidence that demonstrates how individual factors create an improvement in employee well-being, it is within this focus that the topic of this PhD is centred.

1.4 Improving individual well-being through workplace coaching

Further debates have begun to shift the literature towards practical suggestions about what contributes to our well-being. Marks et al. (2008) reviewed the existing evidence about actions that improve personal well-being and noted that, although they strived for evidence-based actions, “*there is little epidemiological evidence examining measures and determinants of well-being*”. (Marks et al., 2008, p. 3). The Five Ways to Well-being that they suggested included: connect; learn; notice; give; be active. Each of these starts to build an understanding which communicates how individuals can take control of and improve their well-being. While the Five Ways to Well-being has been popular and well-disseminated through businesses, education and the general public, the five suggested areas are activities and goals that should be prioritised in people’s day-to-day routines, however, that doesn’t mean that everybody will successfully implement these into their daily lives. As pointed out by Marks et al. (2008) and in agreement with the Foresight Challenge Reports (Jenkins et al., 2008), further work is needed on intervention-based strategies in order to better understand issues of effect - size, causality and the conditions that are favourable for sustainable behavior change. The research for this Ph.D. takes these comments on board and combines the framework of well-being at work with empirical explorations of coaching. In particular, there is growing evidence which demonstrates that coaching can contribute to enhanced well-being (e.g. Grant, 2014; Green, Oades and Grant, 2005, 2006; O’Connor and Cavanagh, 2013; Dulagil, Green and Ahern, 2016). This suggests that if employees are going to flourish (personally and professionally), coaching as a workplace intervention

may provide a suitable methodology to support employees to thrive and flourish. The field of coaching is rapidly growing; there is convincing evidence about the efficacy of coaching on well-being outcomes, however, not enough is known about *how* coaching achieves its results and further research is needed in particular to understand the causal mechanisms of change. The research presented in this thesis builds on the existing literature with empirical evidence about coaching interventions and how they work to influence the well-being of employees.

1.5 What is the Ph.D. about?

Prior to starting the Ph.D, I had been working as an HR Practitioner for 15 years in the Public and Private Sectors as well as within my own consultancies (The HR Desk: providing HR advice, support and training to SMEs) and (Coaching for Wellbeing: working as a professional coach and trainer). I am a Chartered Member of the CIPD and an Accredited Practitioner Coach of the IAPC&M with over 2000hrs of coaching experience. It is from the combination of my interest in well-being at work and my coaching experience, that the inspiration for this Ph.D. was born.

During the past 15 years, I have seen the detrimental impact of workplaces which do not prioritise the well-being of their employees; leaving the employees to individually manage their mental health and well-being otherwise resulting in mental ill-health and regularly, a departure of employment from the organisation. Furthermore, through my coaching work, I have repeatedly seen positive well-being outcomes for individuals. This led me to undertake a trial research

programme about the application of coaching to improve mental well-being, which resulted in positive well-being outcomes for all participants. The encouraging results of the initial research finally led me to consider the topic worthy of Ph.D. level research.

My research has, at its foundation, an evidence-based understanding that it is crucial for businesses and individuals to prioritise mental well-being, and if people's well-being at work is encouraged and supported, there are substantial benefits both to the individual, to the workplace and to society as a whole. Therefore, my research will develop the understanding of mental well-being and in particular, the factors that contribute towards mental well-being for individuals; specifically focusing on the use of workplace coaching as a methodology to enhance the well-being of people at work. It is situated within the workplace but with a focus on individual well-being outcomes whilst also recognising the crucial links to the benefits for businesses and society.

What hasn't been clearly evidenced in the existing literature are the causal mechanisms by which any changes to well-being may take place. The research will therefore utilise a mixed methods research strategy within a critical realist philosophy to explore the underlying causal mechanisms of how change takes place, taking particular note of the process, impact and outcomes from coaching.

1.6 Aims and Objectives

Whilst the importance of well-being at work has been established in the background literature stated above, there is a substantial field of research into

workplace well-being which details the workplace factors that impact on well-being. Therefore, whilst the desired outcome from this research is improved mental well-being for the participants and conversely benefits for the business, there is a need to develop primary research in *how individual mental well-being can be improved*. It is suggested that mental well-being could be improved through the adoption of a workplace coaching methodology. The aim of this thesis is therefore to determine the efficacy of workplace coaching as a methodology for improving mental well-being. Furthermore, to develop an understanding of the process of workplace coaching and causal mechanisms that underpin changes to well-being. Specifically, the research objectives are to:

1. Determine the efficacy of coaching on the mental well-being of participants
2. Explore the changes that occur in mental well-being of both coaches and coachees as a result of workplace coaching.
3. Understand the process and causal mechanisms of coaching to explore its impact on mental well-being of individuals (during and after a coaching intervention)

One of the specific objectives of this research is to undertake coaching in the workplace. This is because the workplace has a key role to play in supporting well-being and added to this, there has been growing interest in coaching at work and an increase in training in-house coaches. What is less commonly seen is coaching specifically tailored to support mental well-being at work and there are very few research designs where the coaches themselves undergo the coaching to form part of the findings. The benefits of this approach enable the coaches to

be trained so that “well-being coaching” can be rolled out across the organisation which will feed into the findings and also provide ongoing research and organisational benefits. Furthermore, it will enable the impact of coaching across two participant groups to be recorded and considerations about whether not only being coached, but also *being a coach* has any impact on well-being outcomes.

By undertaking this research, a contribution can be made not only to the academic literature, but also to the coaching profession, to individuals and to organisations. This research builds on the important role of organisations in understanding and facilitating employee well-being but furthermore, will bring into the limelight coaching as a methodology for enhancing well-being. It is hoped that subsequently individuals will take responsibility for their own mental well-being and organisations will facilitate this process by providing opportunities for coaching within the workplace and feed this into their business strategy; resulting in businesses that are sustained and developed through a healthy, happy and fulfilled workforce.

1.7 Thesis structure and contents

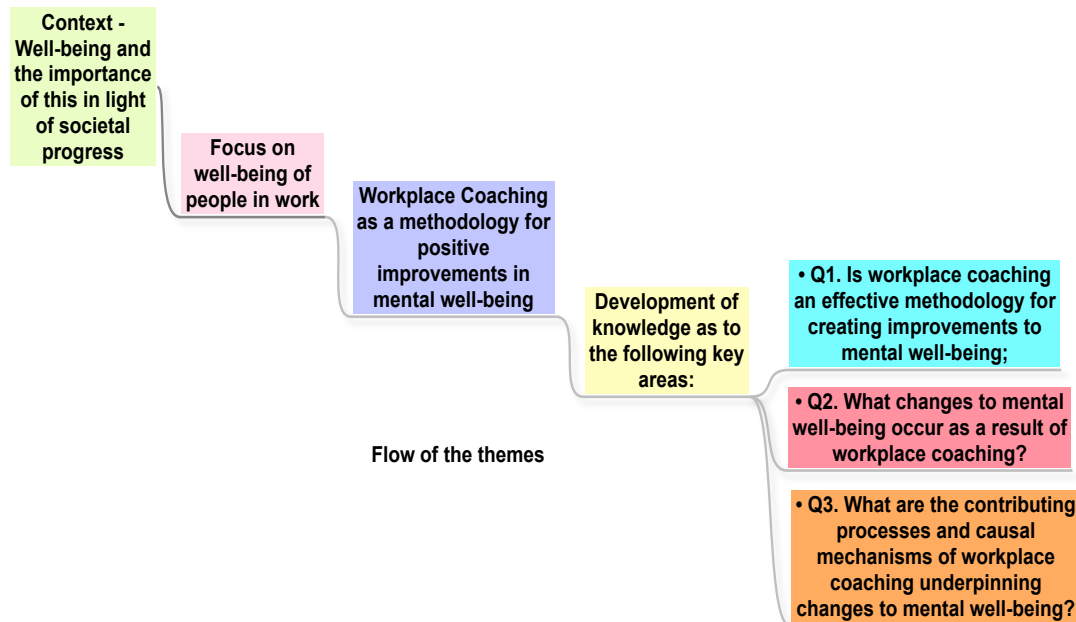


Figure 5: Mind map of the themes of the thesis

The thesis includes five further chapters covering: the literature review; methodology; findings; discussion; and conclusion. An overview of the contents of each of these chapters is provided below.

Chapter two provides an overview of the relevant literature which forms the basis of the theoretical foundations for the remainder of the thesis. It starts with the context of well-being and work, and then moves into a brief history into the literature for positive functioning. Taking into account both subjective and psychological well-being theory, mental well-being is positioned as the encompassing term which is achieved when an individual feels good and

functions positively in an environment where they can flourish and achieve their full potential, vitality and sense of purpose at work and in society. Several key theories underpin the literature both around well-being and coaching and these set the scene for the chosen theoretical framework of positive psychology. Added to the key theories are a number of rigorous standards for measuring well-being, including the National Accounts of Well-being which forms the foundations for the research methodology presented in chapter three. The second half of chapter two focuses on the well-being interventions, starting with an overview and broad perspective of the research findings for enhancing well-being and then moving into the specific literature for workplace coaching including: coaching models; coaching outcomes; and the efficacy of coaching. From the literature, coaching is defined as a collaborative process by which the coach facilitates self-awareness, responsibility and well-being, which contribute towards goal attainment and flourishing of the client. The presenting gaps in the research are compiled into three key areas: does coaching change mental well-being? What factors associated with coaching and its processes assist changes in well-being? What change takes place when a person experiences coaching? Conclusions to the chapter are made which suggest there is growing evidence that coaching results in a number of positive well-being outcomes, with explanations suggested as to how these results are achieved. However, it is highlighted that the question “why coaching works” is under-developed within research and this is presented as an opportunity that feeds into the research questions for this thesis.

Chapter three explains the underlying philosophical assumptions of the research process and identifies methodologies in relation to the paradigms of inquiry. It

discusses the differences between the methodological approaches and positions the research within critical realism which offers the opportunity to determine the underlying causal mechanisms of coaching responsible for well-being outcomes. The chapter develops to discuss the methodology and mixed-methods approach to data collection and the design for the most appropriate modes for collection of data, including semi-structured interviews, questionnaires and mixed-methods surveys. Justification is provided for the use of the National Accounts of Well-being Survey as the instrument for gathering quantitative well-being data before and after participation in a coaching programme. Details are also offered about the design of the coaching intervention which entails a group of coaches undertaking a six-month coaching for well-being programme and as part of this, also recruiting “coachees” to undertake workplace coaching. Ethical considerations are made as well as an outline of how the data will be collected and analysed using NVIVO and SPSS, also taking into account a process of retrodution in accordance with the critical realist philosophy to determine the underlying causal mechanisms. The chapter ends with a critical evaluation and conclusion that this methodology offers an opportunity to contribute to the literature by exploring how and why coaching may be a suitable methodology for positively impacting the well-being of employees.

Chapter four considers through the mixed-methods research whether coaching has impacted the mental well-being of participants, along with analysing specific changes and the underlying processes and causal mechanisms of workplace coaching that contribute and are responsible for the results. The chapter details the results of the data gathered from interviews (n=30); one focus group (n=14);

two surveys ($n=47 \times 2$) as well as mixed-methods questionnaires taken throughout the research. Findings are discussed in light of the research questions considering whether participants' well-being has changed; what changes take place due to the workplace coaching and what the causal mechanisms are by which changes to well-being take place. Finally, limitations to the findings are discussed and conclusions are made which suggest that workplace coaching is a suitable methodology for improving the well-being of employees, furthermore that there are several underlying mechanisms responsible for generating a variety of well-being benefits and these mechanisms need to be taken into account within coaching processes to contribute to favourable well-being outcomes.

Chapter five posits the findings in light of the existing literature and discusses the relevance of these, considering the contribution to the literature in relation to the three research questions:

1. does participants' well-being change as a result of a workplace coaching intervention?
2. What changes to mental well-being occur as a result of workplace coaching?
3. What are the contributing processes and causal mechanisms of workplace coaching that underpin changes to mental well-being?

Finally, chapter six provides conclusions to the thesis overall in terms of the efficacy of workplace coaching as a methodology for improving the mental well-being of employees. Contributions to theory, literature and practice are provided

along with limitations to the research, implications of the findings and recommendations for future research. Recommendations for Government, workplace and coaches/coach trainers are provided as well as recommendations to individuals. The thesis concludes that coaching has been demonstrated as an effective methodology for improving the mental well-being of employees and that this contributes to the growing literature about how we can improve our mental well-being.

The strength of this research is that it pulls together an all-encompassing definition of well-being under the term “mental well-being” and added to this also considers the causal mechanisms and processes responsible for the recorded changes to well-being. It builds on and adds to the existing literature, theory and practice considering well-being at work and provides a methodology that workplaces and individuals can adapt to harness and improve their mental well-being, whilst also providing evidence about the factors that impact on behaviour and well-being change.

Chapter 2 – Literature Review

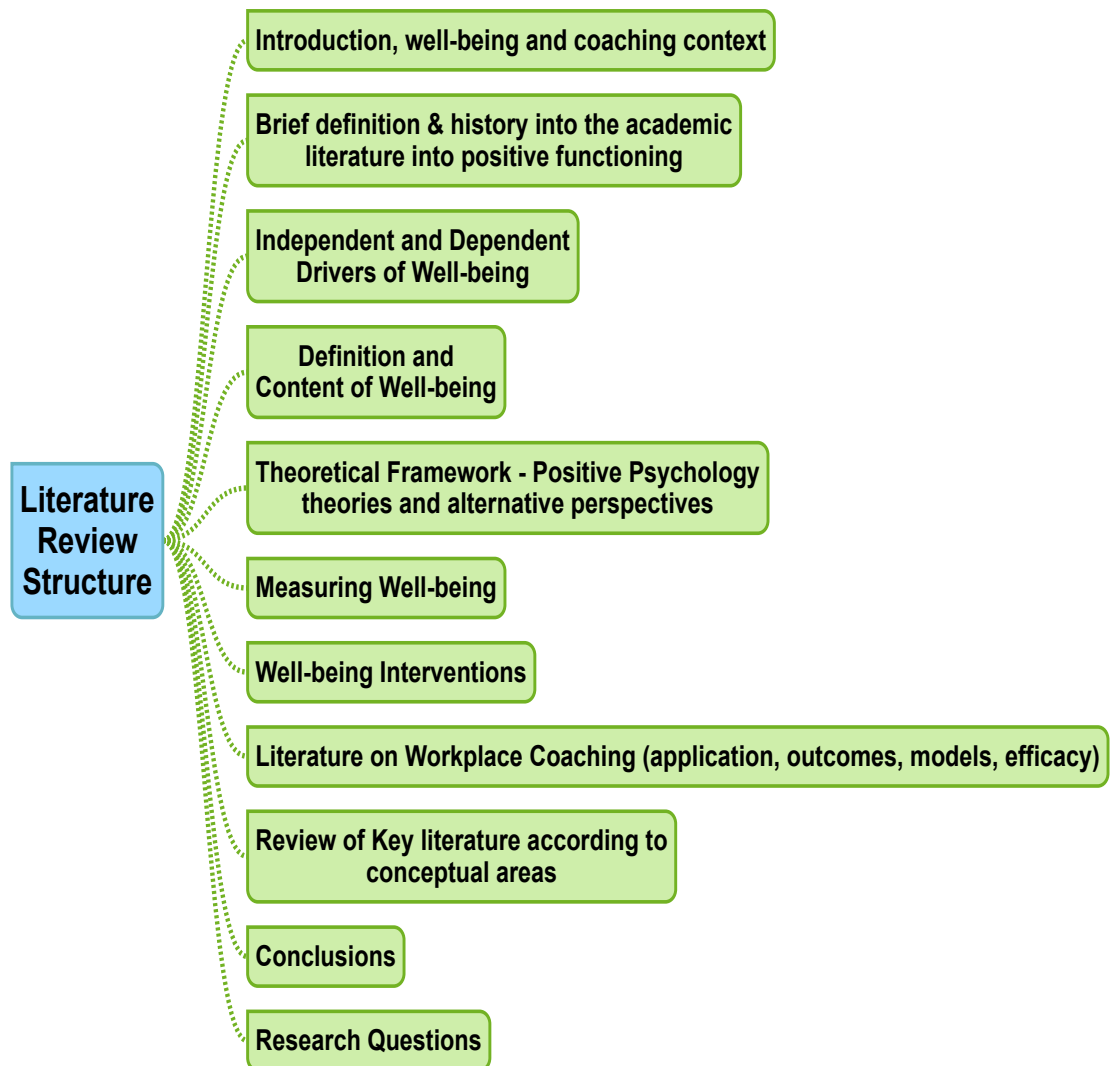


Figure 6: Mind map overview of the literature review chapter

“The basic root of happiness lies in our minds: outer circumstance are nothing more than adverse or favourable”.

(Matthieu Ricard)

2.0 Introduction

HM Government (2008) commissioned a comprehensive research project into mental capital and well-being that considered evidence for factors that influence an individual's mental development and well-being. It highlighted the strategic importance of a society which flourishes and at the same time recognised the *“human, social and economic costs of impaired health and well-being in relation to working life in Britain”* (Black 2009:4). Since then, interest in health and well-being and what contributes towards it has blossomed.

The PhD research presented here contributes to the literature by covering two key areas: mental well-being, its makeup, measurements and key factors associated with positive mental health; and coaching: an emerging intervention which may be key in understanding what we can do as individuals, as organisations and as a society to contribute towards our own mental well-being, well-being at work and ultimately to flourishing as a nation.

This chapter will explore an overview of the current debate around well-being, including the nature of existing empirical and practitioner research along with supporting Governments reports, development around the gaps in the research and opportunities for future research. It will set the context and provide a relevant theoretical framework and then move on to discuss the key features and

associated measurements of mental well-being. As the topic involves not just a consideration of mental well-being, but the relevance of workplace coaching in contributing towards human flourishing, the next section will bring together key literature about the coaching interventions as relevant to knowledge concerning well-being, this will be divided into the three key conceptual areas which emerge from the existing literature: Does coaching change well-being? What factors associated with coaching and its processes assist changes in well-being? And, what changes take place when a person experiences coaching? Gaps in the existing literature will be explored and the emerging research questions will be outlined. Key findings and discussions will conclude the work on this chapter.

2.1 Well-being and work context

“Having employment is in itself vital to people’s health and well-being, and the quality of the work people undertake is a major factor in helping them remain healthy and content. Worker well-being is the single biggest contributor to good work and job quality in the UK and elsewhere.” (Gwyther, 2018, p. 5). It therefore makes sense that employees are supported in improving their well-being. However, the road to healthy workplaces has had and in many respects, still has, a chequered reality. Waddell, et. al. (2006) suggested that traditional approaches to workplace well-being have focused on the harmful effects of work on health and well-being, viewing work as a potential hazard. Fortunately, they focused their review on whether work is good for your health and well-being, and this has paved the way for many subsequent articles, public health and welfare reform agendas and business practices focusing on the positive contributors to well-being at work and human functioning.

Starting with the traditional approach to workplace well-being, it is unsurprising that the literature has focused on sickness absence and particularly stress at work: Survey findings from Britain's Healthiest Workplace (2018) demonstrates that UK employees lost 13.5% of their working hours due to absence (1.2%) and presenteeism (12.5%). This is a worsening picture over time, with days lost per employee up from 23 days lost in 2014 compared to 35.6 days in 2018. 34% of employees indicated that work-related stress was the cause of feeling unwell and on top of this, people feel overworked, overloaded (30% had workloads that are to some extent unmanageable and 6% have "far too much" work each day). The CIPD UK Working Lives Survey (2018) states that average employee works 5hrs more than they would like to each week and 63% would like to reduce their hours (Gwyther, 2018). These findings are similar to other surveys, for instance, Robertson Cooper's (2013) survey data suggests that: *"We now work more hours than at any point in the last 20 years with 1 in 5 of us working 7 hours or more unpaid overtime each week.* Yet, their data also demonstrated that *"the biggest worry for employees is not having enough time to complete their work"*. There is strong evidence linking poor health and particularly, poor mental health (such as depression) with long working hours (e.g. Bannai and Tamakoshi, 2014). Robertson Cooper (2013) suggest that personal resilience is key to adapting in this environment and coping with associated challenges e.g. high workloads.

Research surveys clearly demonstrate the importance of reducing sickness absence and improving well-being, but the key now is answering the problem by demonstrating *how* this can be achieved by looking at factors that influence keeping people in good work and reducing stress. The CIPD (2016) suggest that

there are five inter-related domains of employee well-being relating to both the individual and the organisation (see Fig. 7 below):



Figure 7: CIPD (2016) Well-being model: the five domains of well-being

The CIPD suggest how employers (and employees) can create a 'well-being-focused organisation'. For instance, related to 'work', they suggest the importance of good line management and management of work demands, this is reinforced with research by Mackay et al. (2004) which resulted in the HSE Management Standards detailing the management factors influencing work-related stress. Furthermore, research by Yarker, Lewis, Donaldson-Feilder and Flaxman (2008) detailed the management competencies for preventing and reducing stress at work. However, it also needs to be considered how an 'individual' can proactively enhance their mental well-being at work, for example,

the CIPD suggest that 'personal growth' is a key area, focusing for instance on career development, emotions, lifelong learning and creativity. Activities such as personal resilience training, skills utilisation and performance development plans have been suggested to fulfil these elements (e.g. Govindji and Linley (2007) demonstrated that strengths knowledge and strengths use and organismic valuing were positively associated with well-being).

Within the domain of 'collective/social' the CIPD recommend employee voice and positive relations. This is reinforced by existing research which demonstrates that participation in social activities and one's community increases positive emotions which in turn contribute towards enhanced well-being (e.g. Helliwell and Putnam, 2005). Two further areas of 'health' and 'values/principles' are suggested and here, factors such as physical and mental health and safety and leadership, ethical standards and diversity are considered, taking into account activities such as values-based leadership, stress management and safe working practices.

What can clearly be seen from the CIPD model (figure 7) is the interrelatedness of each of the domains and the overlapping responsibility between the organisation and individual to synthesise health and work priorities. The contribution of work and organisational initiatives such as coaching and other interventions have become influential in meeting these needs.

2.2 Coaching Context

Studies have indicated that coaching can improve workplace stress reduction (Wright, 2007), goal attainment, reduced anxiety and stress (Grant, 2003; Green, Grant and Rynsaardt, 2007). There is also evidence around the value of coaching for not only overcoming stress, but more proactively, improving well-being: enhancing psychological and subjective well-being (Green, Oades and Grant, 2006; Spence and Grant, 2007) and improving resilience (Grant et al., 2009).

Within the workplace, Duijts et al. (2008) examined the effectiveness of coaching as a means of reducing sickness absence due to psychosocial health complaints. They found significant improvements on well-being outcomes, in life satisfaction, health, burnout, and psychological well-being; indicating that coaching can enhance the general well-being of employees. Yet, in spite of the coaching industry booming (it is estimated by the ICF (2016) that there are over 53,000 coach practitioners worldwide representing with a global total revenue of over \$2billion and a 19% increase on the previous survey in 2012), there is limited research about the change process that takes place in seeking to improve well-being and particularly the evidence around the validity of coaching is limited: there were only 93 articles published between 1937 and 1999. Although there were 634 articles and dissertations on coaching by 2011 (Grant, 2012) most of this is contextual or survey-based research rather than outcome research. In addition, evidence over the past decade and beyond has predominantly focused on other methods for reducing stress and enhancing well-being, indeed the HSE (2003) suggests that counselling is a widespread intervention employed by

organisations for managing stress. A study by Gyllensten et al. (2005) suggested that coaching could be a useful alternative to counselling for managing stress and may be useful to overcome the perception of some organisations who have negative views of counselling.

This chapter aims to explore this area further through an exploration of the literature around a definition of mental well-being, its content as well as contributory factors. It is within this literature that the concept of workplace coaching as a methodology for improving mental well-being will be addressed.

2.3 A brief history of the literature into what constitutes positive functioning

The broad reaching interest in the field of what makes us feel good and function well has resulted in an extensive and diverse literature-base analysing positive psychological functioning, including perspectives such as Maslow's concept of self-actualisation (1968), and Roger's view of the fully functioning person (1961). Alongside this, researchers have sought to measure well-being in a number of studies focusing on differing parts: Mood (Schwarz and Clore, 1983) positive feelings (Diener, Larsen, Levine, and Emmons, 1985), and predominantly the distinction between positive and negative affect and life satisfaction (e.g. Bradburn, 1969; Phillips, Andrews and Withey, 1978; Bryant and Veroff, 1982; Diener and Emmons, 1984; Liang, 1984, 1985; Stock, Okun and Benin, 1986).

The literature developed over the past decade and beyond contributes towards our understanding of human flourishing and is a welcome change from the stress

and mental ill-health literature that has dominated the focus of researchers dating back to Cannon's (1914) physiological model of stress (fight and flight response). We now have an emerging community of informed, engaged and cross-disciplinary researchers working on an agenda that focuses on the positive aspects of human functioning.

2.3.1 The difference between ill-being and well-being

Within psychology, the literature into positive functioning has traditionally focused on ill-health rather than well-being and subsequently the established theories focus on reducing stress rather than improving well-being (e.g. Lazarus and Folkman (1984) – the transactional theory of stress; and Karasek (1979); Karasek and Theorell (1990) – Model of demands/control and support). Interestingly, it was in the Foresight, Psychological well-being report (Huppert, 2008) where they recognised among their research that well-being is more than the absence of ill-being and needs to be studied in its own right. And that in order to do this, we need to distinguish between:

- a. Treating disorder when it is present
- b. Preventing disorder from occurring
- c. Enhancing well-being (i.e. increasing flourishing)

In addition, they suggest there is evidence that many of the drivers of well-being are not the same as the drivers of ill-being and there is *“the strong possibility that, by increasing flourishing in the population, we might do more to reduce common*

mental and behavioural problems than by focusing exclusively on the treatment and prevention of disorder” (Huppert, 2008, p.3).

It is the field of neuroscience that provides guidance in understanding this complex area further: When someone experiences stress, the hypothalamic-pituitary-adrenal (HPA) axis is activated as evidenced by increased secretion of the stress hormone cortisol. Levels of cortisol secretion vary widely throughout the day and can be modulated by individual differences in psychological well-being (including our emotional style and self-esteem) (Smyth et al., 1998; Pruessner, Hellhammer and Kirschbaum, 1999; Polk et al., 2005; Jacobs et al., 2007). Several studies have found that a healthy pattern (Clow, 2004) is associated with high scores on measures of well-being (positive affect, psychological well-being and optimism), but not with scores on measures of ill-being (fear, anxiety, pessimism and negative affect) (Lai et al., 2005; Ryff et al., 2006; Steptoe, Gibson, Hamer, and Wardle, 2007; Steptoe and Wardle, 2005). *“Thus, the association between well-being and the cortisol cycle has been demonstrated not to be the inverse of the known association with stress or distress. Both positive and negative states are associated with the cortisol response, but independently of each other” (Huppert, 2008, p. 5).*

In addition, a study by Flory, Manuck, Matthews, and Muldoon (2004) found that serotonin level was related to positive moods averaged across seven days but not to negative mood, suggesting that mental well-being and ill-being produce different neurobiological as well as behavioural effects. Although it needs further research, this supports the idea that, well-being and ill-being are indeed

dependent and different from each other. Naturally, this leads us to the conclusion that, if they are separate entities, then the way we approach health and ill-health is also separate.

Counter to this argument is evidence by Huppert and So (2013, p. 849) that although, what they refer to as “flourishing” is more than the absence of disorder (as above), it could be conceived as the opposite of mental disorder, rather than merely its absence. They identified the positive pole of each symptom dimension of common mental disorders (generalised anxiety and depression according to agreed sets of diagnostic criteria (DSM-IV and ICD-10). This resulted in the following which they use to represent the positive aspects of mental functioning: competence, emotional stability, engagement, meaning, optimism, positive emotion, positive relationships, resilience, self-esteem and vitality. These findings have been developed into a methodology for measuring and understanding levels of mental well-being and usefully include both hedonic and eudaemonic aspects of well-being which represent both the feeling good and functioning well aspects of well-being.

2.4 Independent and dependent drivers of well-being

The field of mental health is complex and influenced by a number of factors (drivers). Genetics have a strong part to play in the development of psychological well-being and resilience to stress (e.g. Caspi et al., 2003; Kendler et al., 2005; Rao et al., 2007). Early childhood development, especially maternal care has also been shown to powerfully influence an individual’s level of mental capital and well-being (Liu, et al., 1997, 2000). This presents potential lifelong impairments

in neurobiology and behaviour resulting from adverse early environments (Huppert, 2008). However, there is also the opportunity for high levels of psychological well-being of those experiencing parental warmth at any early age (Ryff, 1989) and that recovery from adverse childhood experiences is possible later in life (Francis et al., 2002). Several further factors have been consistent with mental well-being, these are outlined below.

2.4.1 Personality traits

Of the factors that impact well-being, there has been a large body of evidence examining the impact of personality as one of the strongest predictors of emotional well-being. A large meta analysis by Deneve and Cooper (1998) used literature search strategies to examine 137 distinct personality constructs as correlates of subjective well-being. *“Personality was found to be equally predictive of life satisfaction, happiness, and positive affect, but significantly less predictive of negative affect.”* (Deneve and Cooper, 1998, p.1). The personality traits were clustered into the “Big Five dimensions of personality” (Extraversion/surgency factor, Agreeableness, Conscientiousness/Constraint, Neuroticism/Emotional Stability, Openness to Experience). However, there are several theoretical reasons which offer an argument that happiness cannot fully be explained by personality. Diener (1996) outlined that when looking on a short-term basis, personality is generally weaker than situational factors and it is only when focusing on long term levels of affect that personality is a strong predictor of subjective well-being (SWB). Secondly, environmental circumstances can produce lasting differences: Diener, Diener and Diener (1995) found a marked difference in the subjective well-being scores between the poorest and wealthiest

countries, furthermore, Diener (1996) suggested that *“personality may predict within-group differences strongly because of shared environment of that group. However, when shifting to examine differences between groups, nations, or cultures (that do not share the same environment), environmental affects are more likely to be found”* (Deneve and Cooper, 1998, p. 221). Finally, Diener (1996) also found that although heritability may account for half of the SWB variance, the remaining 50% is due to other factors including goal striving, good relationships, daily events and ‘flow’ experiences. In other words, personality is important when looking at long-term SWB, but other factors are more important with short-term SWB.

2.4.2 Socio-economic factors

Societal levels and income have been shown to have comparable effects on well-being with higher levels of well-being being associated with higher levels of income and socio-economic status (e.g. Easterlin, 1974; Dolan, Peasgood and White, 2008). Furthermore, factors such as adverse changes to health may also impact negatively on well-being (Easterlin, 2004). Similarly, unemployment has been seen to have a negative impact on well-being (e.g. Di Tella, MacCulloch and Oswald, 2001; Wolfers, 2003). The relationship between income and well-being has been reflected within recent changes to the ONS which since February 2019 has combined measures of income and personal well-being in order to provide a clearer view of UK household well-being. This links with the “Easterlin Paradox” (1974) which stated that at a point in time, happiness correlates to higher income. However, the theory also states that, over time, happiness does not increase in line with a country’s economic increase. These findings have

been critiqued for the time series relationship between happiness and income, yet, interestingly, Glenn Everett (Head of Inequalities, ONS) reporting on the February 2019 survey results said: *“Despite high levels of employment, rising incomes and spending across UK households, people are not reporting increases in their well-being. This may be due to worries about rising debt repayments, which could be driving concerns about their future financial situation.”* (Office for National Statistics, 2019a).

2.4.3 Demographic factors

Demographic factors such as age (e.g. Blanchflower, 2008; Oswald, 1997; Helliwell, 2003) and relationships (Conceição and Bandura, 2008; Blanchflower and Oswald, 2000; Helliwell, 2003 and Diener et al., 2000; Easterlin, 2005) have also been shown to impact on well-being with a “U-shaped” relationship between age and well-being, and more favourable results to well-being for getting married, although further studies imply less conclusive results especially when it comes to children living at home, and the autonomy associated with being separated or divorced (see review by Dolan, Peasgood and White, 2008). The research into gender and well-being is also less conclusive with clearer results demonstrating a relationship between gender and mental ill-health (e.g. anxiety/depression) rather than on well-being outcomes which tends to show little evidence of gender differences (e.g. Helliwell, 2003)

2.4.4 Distinct drivers of well-being (not ill-being)

While there are similarities in some of the drivers between well-being and ill-being there are also more distinct drivers which the field of well-being doesn't have in

common with ill-being. Lyubomirsky (2001) suggested that activities which are “intentional” i.e. that we have control over, are important drivers of psychological well-being (positive emotions, positive thoughts, positive behaviours, need satisfaction). Huppert (2008) suggested that *“there may well be substantial leverage in developing interventions that change our behaviour, cognitions and motivations, as a method of improving psychological well-being”* (p.10). She further pointed out that this has been the basis of cognitive behavioural therapy (CBT) which has been useful in reducing symptoms associated with mental health problems, and further adds: *“Adapting such remediation techniques in the service of enhancing well-being for the majority of the population might also prove successful”* (Huppert, 2008, p. 10). Subsequently, Sin and Lyubomirsky (2009) undertook a randomised controlled study and found that people prompted to engage in positive intentional activities (gratitude, optimism, mindfulness) resulted in significantly happier results.

We tend to have more control over these drivers and interventions such as coaching have been shown to improve these aspects contributing towards improved mental well-being (e.g. building cognitive hardiness and hope: Green, Grant and Rynsaardt, 2007). Where well-being and ill-being share the same drivers, the model below reflects how a small change in the average level of psychological resources can produce a large increase in the percentage of people who are flourishing. Added to this, an increase in independent well-being drivers e.g. positive thinking, may represent additional ways to increase flourishing of the population, potentially resulting in benefits for productivity at work, health and general levels of well-being (Huppert, 2008).

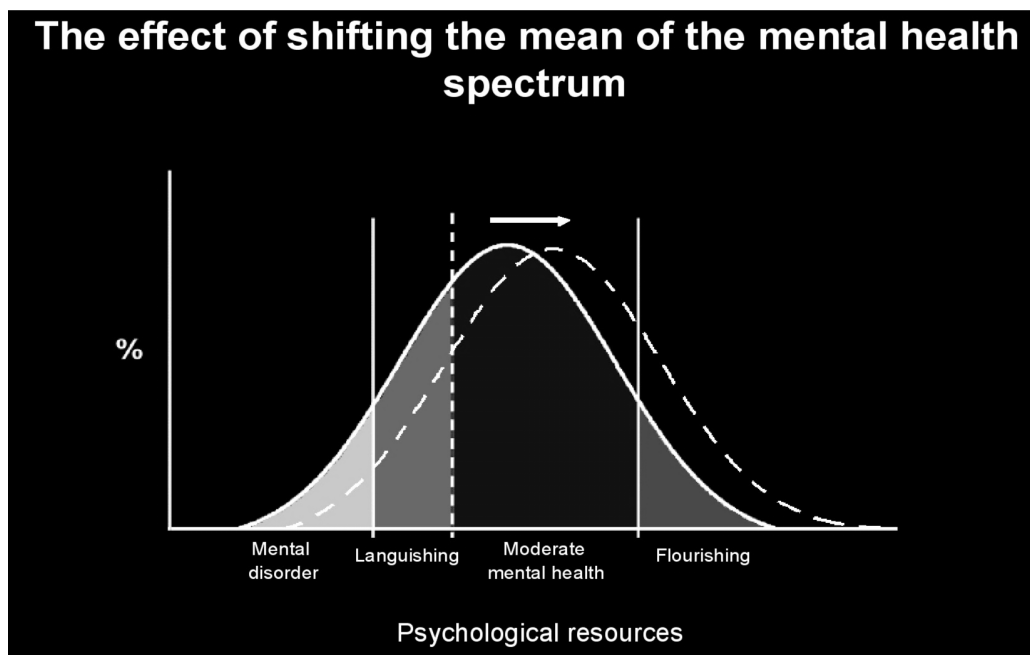


Figure 8: The effect of shifting the mean of the mental health spectrum (Huppert, 2008, p.13)

While it is recognised that there are many drivers of well-being that are impacted from birth, there is substantial leverage in developing the skills and resources of individuals in order to support them to undertake positive, intentional activities. Furthermore, it is suggested that coaching may be a suitable intervention to support this activity and the focus of this thesis sits within this remit.

2.5 The definition and content of well-being

Several researchers have aimed to identify and define well-being. In the academic literature, the term mental well-being and positive mental health are often used interchangeably along with other terms such as well-being, happiness and more recently “flourishing” (Seligman, 2011), this can lead to a confused evidence base. However, the evidence is based on research around the two distinctive features of hedonic/eudaimonic well-being. One of the earliest “well-being theories” was eudaimonia; a theory of self-realisation (Norton, 1976). This

ethical theory calls people to recognise and live in accordance with the daimon or “true self” (Norton, 1976). Its most notable treatment was in Aristotle's (1985) *Nicomachean Ethics*.

“The daimon refers to those potentialities of each person, the realization of which represents the greatest fulfilment in living of which each is capable. ...The daimon is an ideal in the sense of being an excellence, a perfection toward which one strives and, hence, it can give meaning and direction to one's life. Efforts to live in accordance with the daimon, to realize those potentials (self-realization), give rise to a condition termed eudaimonia. Such efforts can be said to be personally expressive of the individual” (Waterman, 1993, p. 678).

In modern day language, eudaimonia as defined by Aristotle, is related to the achievement of ultimate human potential. Various definitions of eudaimonia exist but Huta and Waterman (2013) suggested that most definitions include four core definitional elements:

1. Authenticity – clarifying one's true self and deep values, being connected to and acting in accordance with them;
2. Meaning – understanding the bigger picture of sense of identity, purpose and connectedness to others, society and the ecosystem;
3. Excellence – striving for higher quality and standards in one's behaviour, performance, accomplishments and ethics;
4. Growth – actualising one's potential, pursuing personal goals, learning, and seeking new challenges so that one matures as a human being (Huta and Waterman, 2013).

Eudaimonia aligns with the philosophy and methodology of coaching, which is to support clients to achieve their outcomes, and for many, this is about the

realisation of achieving goals and seeking ultimate happiness. The key question that comes from this theory is therefore, how can happiness be achieved, and researchers have been aiming to understand this since before Aristotle.

While the theories of eudaimonia sound like a utopian experience, the hedonic philosophical perspectives of well-being emphasise a more subjective nature. A hedonic orientation involves: *“Seeking happiness, positive affect, life satisfaction, and reduced negative affect. In this way hedonia refers to an absence of distress or an affect balance such that positive experiences outweigh negative experiences”* (Joseph, 2015, p. 15). The literature surrounding hedonic aspects of well-being have commonly been referred to as “happiness” and can unfortunately represent well-being as temporary, light-hearted, and fun, but not grounded in the evidence which demonstrates its substantial impact on much more than simply happiness. For example, well-being has been defined by Waddell and Burton (2006) as: *“The subjective state of being healthy, happy, contented, comfortable and satisfied with one’s quality of life. It includes physical, material, social, emotional (“Happiness”), and development and activity dimensions”* (Waddell and Burton, 2006, p. 4). This definition emphasises the subjective nature of well-being.

To further confuse the debate around the definition of well-being, Joseph (2015) suggests that in modern literature, hedonia is commonly referred to as subjective well-being while eudaimonia is referred to as psychological well-being. Yet, some definitions of “subjective well-being” seem to incorporate both hedonic and eudaimonic well-being. This can be seen in the definition by Michaelson et al.

(2009) which states that the science of 'subjective well-being' suggests that as well as experiencing good feelings (hedonia), people need personal vitality, to feel competent and autonomous by engaging in meaningful activities and a sense of resilience. It also suggests that it is important for people to connect and relate to others through social experiences and supportive relationships (Michaelson et al., 2009). This definition moves closer towards an understanding of "mental well-being" as will be defined below.

2.5.1 More than just happiness

Looking at both the hedonic and eudaimonic definitions of well-being, there is an argument for suggesting that well-being is more than just happiness (i.e. hedonia). In summary hedonia is about pleasure in life, whereas eudaimonia is about meaning, and that fulfilling activities are where both are seamlessly combined. (Waterman, 1993; Compton et al., 1996; Keyes, Shmotkin and Ryff, 2002; Joseph, 2015). This implies that well-being is multi-dimensional and dynamic and bring together both aspects of hedonia and eudaimonia. The modern definitions that encompass both these aspects have come under the umbrella term "mental well-being". Mental well-being doesn't include physical aspects of well-being such as healthy lifestyles i.e. healthy eating, sleeping, exercise although these may be goals for some as part of their wider well-being.

2.5.2 Mental Well-being

The term mental well-being appears to have gained recognition particularly since the publication of the Foresight (2008) reports. However, it is closely related to the definition of positive mental health as outlined by Jahoda (1958) which

highlighted six key elements of positive functioning: attitudes of an individual toward his own self; self actualization; integration; autonomy; perception of reality; and environmental mastery (p. 23). It covers the positive end of human functioning and is an all-encompassing term including both hedonic (feeling good) and eudaimonic (functioning well) components of well-being as well as embracing emotional, social and work-related well-being. The terms *flourishing*, *well-being* and *mental well-being* tend to be used synonymously, however, “mental well-being” draws distinction from “physical well-being” the latter of which has influenced general definitions, while “flourishing” refers more specifically to high-levels of mental well-being (Huppert and So, 2013).

Mental well-being is recognised as having major consequences for health and social relationships (Linley and Joseph, 2004; Huppert and Wittington, 2008) and has given rise to positive psychologies aimed at facilitating positive mental health (Joseph, 2015). There is also an argument for mental well-being to draw a distinction between positive and negative affect. Negative affect (NA) refers to subjective distress for example depression and anxiety whereas positive affect (PA) refers to positive moods such as calmness and a sense of well-being (Polk et al., 2005). Therefore, mental well-being is referring to the absence of mental ill health (negative affect) and consequently the experience of positive affect.

Added to the academic evidence base around what constitutes well-being are governmental reports exploring well-being for public policy. For instance, the Public Health White Paper (2011, p. 9) relates mental well-being as “*the ability to cope with life’s problems and make the most of life’s opportunities*”. Clarifying

further, it is about individuals feeling good and being able to function well as a society (Department of Health, 2011). Dewe and Kompier (2008, p. 7) say that mental well-being can be defined as: *“a dynamic state in which the individual is able to develop their potential, work productively and creatively, build strong and positive relationships with others, and contribute to their community. It is enhanced when an individual is able to fulfil their personal and social goals and achieve a sense of purpose in society”*. This highlights some useful key elements; that well-being is a dynamic state and includes a strong focus on developing one’s own potential by contributing to the community, including their working community. This is further demonstrated in the World Health Organisation (WHO) wider concept of mental health which suggests that mental health combines a person’s normal stressors and their potential: *“A state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”* (World Health Organization, 2001, p. 1).

A key message is that mental well-being, as implicated through academic insight, policy documents and reports, has a positive influence on society within an interconnected and competitive world and is crucial for a sustainable and prosperous future (Foresight Mental Capital and Wellbeing Project, 2008; WHO, 2014). The remainder of this thesis will focus on “mental well-being” when referring to “well-being” and specifically, the definition which will be used to refer to mental well-being throughout this thesis is when an individual feels good and

functions positively in an environment where they can flourish and achieve their full potential, vitality and sense of purpose at work and in society.

2.6 Summary

This section has highlighted the history, content and definition of well-being and mental well-being in particular in order to provide a foundation for the remainder of the thesis. A working definition of mental well-being has been provided and now leads into the theoretical framework that will support the research presented here.

2.7 Theoretical framework

Research in the field of coaching has identified a need for more theoretical development in coaching psychology (Theeboom, Beersma and Van Vianen, 2014) and this is particularly required from both an empirical and practical perspective (Grant, 2006; Spence and Oades, 2011). Consequently, coaching research has focused on a large variety of processes and outcome measures (Latham, 2007). However, much of the research cited within this chapter has been positioned within the field of positive psychology (e.g. Seligman and Csikszentmihalyi, 2000) and coaching psychology (e.g. Grant et al., 2010). It is within the field of positive psychology that this research project is positioned.

Positive psychology focuses on studying the scientific notion of happiness including positive emotion, meaning and engagement (Seligman, 2007) whereas coaching psychology focuses on the study of behaviour, cognition and emotion to deepen understanding of the coaching processes and enhance use of the

coaching techniques (Grant et al., 2010). Both areas share their focus on positive aspects of human nature, performance enhancement and well-being and the strengths of individuals (Linley and Harrington, 2005). *“The research in the field of coaching psychology is very promising as it has found that a coaching approach based on solution focused cognitive behavioural principles can reduce stress and aid goal attainment”* (Palmer, 2007, p. 242). Furthermore, positive psychology appears to offer a robust research framework for coaching and may constitute *“one of the solutions to the lack of a theoretical framework in the coaching field”* (Freire, 2013, p. 428).

The specific theories within the field of positive psychology that are considered within this research are covered below. The first three theories support a definition of well-being and its content: Authentic Happiness, Well-being theory (Seligman, 2002, 2011) and Flourish Theory (Huppert and So, 2011), these theories are then further developed by looking at the relevant theories that are thought to contribute towards well-being: the Concept of Flow (Csikszentmihalyi, 1975, 2002); perspectives on the central role of positive emotions (Fredrickson, 1998, 2001, 2004); and goal setting and the fulfilment of basic psychological needs (Ryan and Deci, 2001). These theories are then related to the popular cognitive behavioural theory which has been used as the main theory in several coaching outcome studies. Finally, an overview of positive psychology is covered which underpins all of the above theories. The final section provides an overview of theories not based upon positive psychology but which, nevertheless, are relevant in understanding and making sense of the field of research.

2.7.1 Authentic Happiness Theory

Seligman (2002)

Martin Seligman (the Father of Positive Psychology) has been prolific in writing about this topic. This fundamental theory was his centrepiece until it was updated to his Well-being Theory. He originally thought that happiness (not well-being) was the central focus of positive psychology and that combined three aspects: positive emotion, engagement and meaning; each fed into life satisfaction and therefore the measurement was entirely subjective. This theory received criticism for its narrow focus on happiness and has been redeveloped to incorporate “meaning and relationships” focusing on flourishing as the goal (Seligman, 2011).

2.7.2 Well-being Theory (PERMA)

Seligman (2011)

Seligman states that well-being is a construct and the topic of positive psychology. According to this theory, well-being has 5 elements that contribute towards it, he draws a distinction specifying that no singular element defines well-being: positive emotion, engagement, positive relationships, meaning, accomplishment. Furthermore, he specifies that the task of positive psychology is to describe rather than prescribe what people do to achieve well-being and therefore he suggests skills and exercises to build those five elements, and that these actions are entirely different from the skills that minimise suffering. This theory has become very popular, especially the PERMA scale for measuring well-being, which has formed the foundation for further research, including the Flourish Theory (below). However, as will be seen with other theories, it raises

the question of whether these five elements include all there is to consider when it comes to pursuing well-being for its own sake.

2.7.3 Flourish Theory

Huppert and So (2011)

Huppert and So derived a conceptual definition of flourishing building on previous research that recognises that flourishing is more than the absence of disorder and therefore needs to be studied in its own right. They came up with a ten-item list by systematically examining symptoms of common mental disorders, anxiety and depression and identifying the positive pole for each symptom dimension. This theory takes into account the five constructs proposed by Seligman as the elements of well-being and adds: emotional stability, optimism, resilience, self-esteem and vitality, to include ten-features representing the positive aspects of mental functioning (Huppert and So, 2011). They suggest that this includes both the hedonic and eudaimonic components i.e. positive feeling and positive functioning and that there is much overlap between their theory and other leading researchers (e.g. Keyes, 2002; Seligman, 2002, 2011). Optimism is an interesting addition as it is described as a useful mediator between external events and a person's interpretation of them (Seligman and Csikszentmihalyi, 2000) and has been referenced in several other descriptors of well-being (e.g. Clow, 2004; Diener et al., 2010). Resilience is also a key addition because it is another mediator between external stressors and mental well-being; the more a person can build their resilience to cope with pressure, the better their chances to return to a content state of well-being (Fredrickson et al., 2003; Bonanno, 2004).

2.7.4 Concept of flow

Csikszentmihalyi (1975, 2002)

Flow (also known as optimal experience) as described by Csikszentmihalyi (1975) refers to a complex state of mind in which there is continuity and fluidity in concentration and action and which contributes to and shapes an individual's developmental pathways. In other words, it is thought to be the state of mind where a person is so absorbed in what they are doing that nothing else matters (Csikszentmihalyi, 2002). Csikszentmihalyi summarised the factors that relate to flow experiences into 9 dimensions: clear goals, immediate feedback, adequate personal skills to meet high challenges, the merging of action and awareness, concentration on the task in focus, perceived control, loss of self-consciousness, altered sense of time, and intrinsic motivation. His (2002) theory predicted that flow would be experienced when there is a balance between skills and challenges and therefore potentially promote well-being. Relating this theory to coaching, it would be important to consider a coachees skills to meet current challenges if well-being is to be promoted. However, this theory also gives insight into the dimensions of a flow experience and which contribute to well-being. Rather than prescribe what flow is, this model refers to the process that takes place and this may contribute to the under-developed aspects of coaching research.

2.7.5 Broaden and build theory of positive emotions

Fredrickson (1998, 2001, 2004)

Positive emotion has been established as an important aspect of well-being as demonstrated through theory (e.g. Seligman, 2002, 2011). The broaden and build theory contributes to this by emphasising the central importance of positive

emotions in predicting an individual's path to growth and well-being (Fredrickson, 1998). This theory suggests that we can broaden and expand our thought-action tendencies with positive emotions giving us expansive and broadened attention subsequently resulting in problem-solving approaches, creative and flexible thinking and that this overtime builds up our physical, social and psychological resources (Fredrickson, 1998, 2001, 2004). Of particular relevance is that further to positive emotions being important for our well-being, the frequency and strength are also key considerations and that the existence of both of these aspects may build optimal flourishing (Conway et al., 2013). Additionally, evidence by Cohn et al. (2009) suggest that experiences of positive emotion improve quality of life by building resilience. Resilience has also been shown to be a key psychological resource and central to well-being. Therefore, experiences of positive emotion have important long-lasting consequences: helping people to build resilience which will impact their ability to cope with future stressors and conceptualise novel ways to solve their own problems (a key consideration within coaching).

The broaden and build theory is key to coaching research because several coaching models recognise the importance of positive emotions (e.g. the SPACE model of coaching: Edgerton and Palmer, 2005) therefore, building positive emotions under this theory may contribute towards results demonstrating an improvement in well-being.

2.7.6 Self Determination Theory (SDT)

Ryan and Deci (2001)

Whereas the Broaden and Build theory emphasises the central role of positive emotions in predicting well-being, Ryan and Deci (2001) take an alternative approach using the framework of self-determination theory which suggests that goal setting is a central construct for developing and sustaining health-related behaviours and we experience well-being through fulfilment of the three basic psychological needs: relatedness, competence and autonomy. According to the theory, it is the combination of the socio-cultural condition of people's lives supporting the innate need to participate in interesting activities, using their competence to produce valued outcomes, and feeling closely connected to others, that enables people to do well and feel at their best. It is these important processes through which a person acquires and maintains the motivation for initiating new health-related behaviours. The three core components of SDT support the processes of internalisation and integration, and through this, the person will come to self-regulate and sustain behaviour conducive to health and well-being (Ryan et al., 2008).

Spence and Grant (2013) suggest that SDT may provide the theoretical basis to make sense of how or why coaching might be expected to impact well-being “*by providing a comprehensive account of human functioning and the processes that shape cognitive, emotional and behavioural self-regulation and development*” (Spence and Grant, 2013, p. 1015).

This theory is important within this research because it provides a framework that has been used by coaching psychologists to demonstrate an impact on well-being and sits firmly as a motivation theory within the framework of positive psychology. Equally, goal setting is considered important within coaching models and therefore, SDT may provide a theoretically informed structure to the design of coaching interventions which seek for sustainable changes and motivation for the coachee, especially in the field of well-being. However, whilst SDT may be useful for understanding behaviour change, through the central tendency of goal setting, Palmer and Whybrow (2006) and Palmer (2013) suggest that within the field of Coaching Psychology, Cognitive Behavioural Coaching is one of the most widely used coaching models (based upon Cognitive Behavioural Theory).

2.7.7 Cognitive Behavioural Theory (CBT)

Interestingly, there is no one unified theory which depicts CBT and instead, its original theories came from either behavioural theories (e.g. Watson, 1913, 1924) or cognitive theories (e.g. Ellis, 1962). The cognitive and behavioural theories have merged to produce “*a theoretically complex combination of therapeutic approaches known today as CBT*” (Stephen, Hupp and Jeremy, 2008, p. 263). Motivated by the principles of CBT, Cognitive-Behavioural Coaching (CBC) has emerged and subsequently attracted lots of interest from researchers. It links with SDT and suggests that it is not the events that are experienced which cause joy or distress, but the way it is interpreted, and that the goal of the coaching is to help clients to develop autonomy by raising their awareness of their beliefs and perceptions and replacing it with logical, evidence-based and pragmatic beliefs, ultimately becoming their own coach (Dias, Palmer and Nardi, 2017).

However, despite its effectiveness in a number of coaching scenarios (e.g. stress management and skill development: Ducharme, 2004) it has failed to conclusively demonstrate effectiveness in a workplace scenario for reducing stress (Gyllensten and Palmer, 2005a, 2005b). Dias, Palmer and Nardi (2017) suggest that combining CBC with techniques from positive psychology and solution focused coaching (Integrative Cognitive-Behavioural Coaching (ICBC)) can encapsulate a strengths-based, positive language that works towards an experience that is meaningful and purposeful by identifying values and signature strengths.

It is worth exploring this subtle change more thoroughly to understand the wider implications. CBC looks at the way a person perceives their situation with a view to replacing it with a new (empowering) belief. Conversely, positive psychology is underpinned by a view that people want to experience authentic happiness (Seligman, 2004) and well-being (Seligman, 2011). Similarly, a solution-focused approach explores what the person would consider to be their “preferred future. It subsequently looks for resources (not deficits) and places the client as the expert in his/her life and therefore able to master successful strategies by becoming aware of their full range of abilities and resources. The integration of CBC with positive psychology and solution focused therapy therefore changes its inherent focus from negative, problem-focused, to achievement, strengths-based, solution focused and ultimately, the development of well-being. While there is currently limited empirical evidence into the effectiveness of ICBC due to the recent introduction of this concept (2017), the cognitive behavioural solution focused (CB-SF) approach to coaching has been shown to be effective in a

number of well-being outcomes (mental health, quality of life, levels of insight, goal attainment: e.g. Grant, 2003). Furthermore, the concept of combining positive psychology and solution-focused coaching in the pursuit of well-being is also gaining more attention (e.g. Green and Palmer, 2018).

2.7.8 Positive Psychology

All the above key theories are utilising the field of positive psychology and align with the forward-facing focus that underpins coaching. This is a refreshing change from medical and psychological interventions based around ill-health and disease. Its stated focus on the positive aspects of health also links between the collaboration of coaching to impact well-being. Therefore, the theoretical basis for positive psychology can support the development of the coaching field. However, there are some issues with applying the positive psychology framework to coaching; coaches are not necessarily psychologists and there may be a lack of understanding about the theories and models without a suitable training criteria, yet, just because the theoretical framework of this study is chosen to sit within positive psychology, doesn't mean that it has to be a psychologist who carries out the coaching, merely, that the theoretical basis informs the study. It also implies the opportunity to bridge the gap between coaching psychology and coaching, what advantages the theoretical framework can bring to ensure robustness within coaching, and in turn, what coaching can contribute to positive psychology. This gap is immediately apparent through the lack of studies focusing not only on coaching, but the impact of coaching on well-being, further to this, the lack of non-cognitive behavioural coaching studies.

Although there is a lot of support in favour of positive psychology presented here, the field has come under significant opposition particularly from within the psychology profession. These opinions critique the direction of the psychology field and particularly that it is misrepresentative to focus specifically on the positive aspects of human functioning at the expense of the negative aspects. Lazarus (2003) states: “*this movement presents an almost Polly-anna version of the Garden of Eden notion of the good life and good people while it masquerades as being tough-minded and scientific*” (p. 173). Furthermore, he suggests that the current lack of longitudinal research in positive psychology can make it difficult to infer causation and to fully describe what happens to an individual over time and in different circumstance. He also claimed that positive psychology was at risk of becoming a passing fad, but 15yrs on from when he wrote his target article, it appears that these assertions may have been unfound, with an increase in further research, interest and a growing following.

Nevertheless, there are many complimentary aspects between coaching, positive psychology and well-being and it offers an opportunity to blend these together whilst being underpinned by more than two decades of rigorous scientific enquiry, alongside this, alternative theoretical perspectives can be considered that may advance the research further, these are considered here.

2.7.9 Alternative Theoretical Perspectives

Grant (2010) suggests theoretical enrichment into the advancement of coaching could be drawn by incorporating theoretical perspectives on sub-disciplines of coaching psychology, particularly by looking at related fields such as therapy,

training and mentoring (D'Abate, Eddy and Tannenbaum, 2003). Specifically, this could relate to coaching research into: the design of coaching interventions, the relationship of the coach and coachee and their individual characteristics (Theeboom, Beersma and Van Vianen, 2014). The other relevant theories to this research project will now be considered in brief by considering theories of learning, behaviour and motivation.

2.7.10 Adult Learning Theory

(e.g. Transformative learning: Kolb, 1984; Mezirow, 1991)

Adult learning theory provides insight into how adults learn and among the different theories, incorporates transformative learning which appears to draw parallels with the goals and processes of coaching. The theory describes the conditions and processes necessary for adults to make a significant transformation of knowledge and paradigm shift. It suggests that deeper levels of learning only occur when there are sufficient opportunities for active experimentation and critical reflection. Six common themes are central to these educational and transformative experiences: individual experience, critical reflection, dialogue, holistic orientation, awareness of context, authentic relationship (Taylor, 2009).

Researchers (e.g. Griffiths and Campbell, 2009) have previously aimed to demonstrate the process of learning that takes place within coaching, and it could be argued that coaching achieves results through learning. Zeus and Skiffington (2000, p. 30) suggest "*learning is at the heart of coaching*" and reflecting on the importance placed on self-awareness as cited by (Whitmore, 2009), it could be

argued that in order to raise one's self-awareness, the process of learning needs to take place. So, adult learning theories have an important part to play in understanding and developing the knowledge-base of coaching. The question then arises, whether the learning needs to be formal, informal or both and the potential impact on the coaching and/or well-being. These are important questions and present opportunities for further research and can be taken into account within this research.

2.7.11 Self-regulated Learning

(e.g. Zimmerman, 1989)

Several research studies involving coaching refer to models of self-regulation in the design of the coaching programmes (e.g. Grant, 2001b, 2003). It suggests that students plan, set goals, organise, self-monitor and self-evaluate at various points during the process of acquiring and developing knowledge (Corno, 1986, 1989; Ghatala, 1986; Pressley, Borkowski and Schneider, 1987). Furthermore, it highlights three features common to students who self-regulate their learning: Firstly, they adopt self-regulated learning strategies i.e. *“actions and processes directed at acquisition of information or skills that involve agency, purpose, and instrumentality perceptions by learners”* (Zimmerman, 1990, p. 5). Secondly, the “self-oriented feedback” loop (Zimmerman, 1989; Carver and Scheier, 1981, 1998). This involves the cyclical stages of continuing feedback of learning effectiveness. Finally, they have interdependent motivational processes i.e. they achieve their desired academic outcomes by selecting self-regulated learning strategies to use based on feedback about learning skills and their effectiveness.

What is recognised in coaching in relation to self-regulation is that by attending a series of coaching sessions, individuals will take time to discuss, monitor and evaluate their progress against stated goals. This takes place initially with the Coach, however, over time, it is expected that as the client becomes “their own coach”, they will monitor their own progress and that this will form part of self-regulated learning. It therefore has great potential as a theory to underpin the longitudinal impact of coaching on learning and subsequently, behaviour change.

2.7.12 Social Learning Theory

Rotter (1966); Albert Bandura (1977)

According to this theory of motivation, it is through observation and imitation of others (modelling) in a social context that people acquire and modify their behaviour: *“by observing a model of the desired behaviour, an individual forms an idea of how response components must be combined and sequenced to produce new behaviour. In other words, people guide their actions by prior notions rather than by relying on outcomes to tell them what they must do”* (Bandura, 1977, p. 35). This theory is adopted within a coaching context by potentially reflected on other people who the person can “model”, thus learning takes places by considering this in light of their current situation. It is also relevant in group coaching situations, especially for instance in co-coaching where learning could take place by observing and adapting behaviour based on feedback from peers.

2.7.13 Behavioural Change

Bandura (1977); Peterson (2006)

Adopting a less therapeutic emphasis, the behavioural based approach advocated by Peterson (2006) focuses on practical change over psychological adjustments. It seeks to look to the future and create change embedded in real life contexts but heavily influenced towards personal development through client learning (Ives, 2008).

Coaching tends to be approached from either a therapeutic/psychological base, or from a goal focused/behaviour based approach. While SDT and motivational theories can inform the former approach, behavioural change theory and social learning theory are useful for informing the less therapeutic styles of coaching. Bandura's Social Cognitive Theory (1977) suggests that the main causal determinant of behaviour change takes place through self-efficacy and specifies that this can be achieved through four techniques: mastery experiences, modelling or vicarious experience, persuasion and giving physiologically compatible experiences. This theory has been used to influence a particular style of coaching, (Neuro-Linguistic Programming) which relies heavily on modelling as explained above. This can prove very useful to provide an understanding of desired behaviour and relies heavily on the cognitive process. However, it is important to recognise that internal motivation and external behaviour may not always match and this theory of motivation may be better utilised in conjunction with another theory, for example self-determination theory to achieve desired outcomes.

2.7.14 Humanistic Theory

Maslow (1968); Rogers (1951, 1959, 1961)

Among the humanistic theories, Maslow and Rogers were concerned with the concept of positive functioning. Rogers' approach was based on a meta-theoretical assumption that people have a tendency towards becoming fully functioning and that in order for this to happen they require the right social environment. *"For Rogers, fully functioning meant more than simply the absence of distress and dysfunction. It implied, for example, that a person was self-directed, autonomous and open to experience"* (Joseph, 2015, p.vii). Whereas Maslow's approach (amongst others) was about the needs of individuals and how this directs behaviour. These theories have been an important foundation upon which positive psychology has been built and therefore inform much of what has and will be discussed throughout this thesis.

2.7.15 Set point theory

(e.g. Brickman, Coates and Janoff-Bulman, 1978)

This theory suggests that after being influenced by a positive or negative effect, we will revert back to a particular level of happiness. This level of subjective well-being is determined by heredity and personality training ingrained in early life.

This obviously would impact a study on well-being because of the researchers'/participants beliefs about the extent to which well-being can be impacted by an intervention. Awareness of set point theory is therefore helpful in order to understand pre-conceived ideas but furthermore, if a coachee were to believe that they cannot improve their general level of well-being because of

genetics and life experiences, why would they come to coaching? Research into the determinants of well-being demonstrate that well-being can “recover” from early childhood trauma however, further research would be required in order to determine the longitudinal impact of interventions such as coaching on set points of well-being and whether it can be raised or lowered beyond the set point.

2.8 Chosen theoretical framework for this study

This section has provided an overview of both the predominant theoretical framework (positive psychology) as well as further theories within the fields of psychology, adult learning, behaviour and motivation. Positive psychology has been chosen as the best fit for this research study because it is felt that it can support the design of coaching, provide a rigorous research base and has highlighted opportunities for advancement of the research in this field by combining the areas of well-being with non-selective coaching. This research covers two distinct areas (workplace coaching and mental well-being) and aims to bring these together through the research.

It is questionable whether coaching psychology should have been chosen as the primary research base considering interest into the design of coaching interventions. Naturally, the selected theory will impact on the focus for this thesis; by following a positive psychology framework, further emphasis is placed on the understanding of well-being over the importance of the coaching design. This enables the researcher to consider in depth the impact on well-being predominantly, and subsequently an interest in the process by which change may take place (the coaching). Thereby resulting in a greater understanding of the

process by which change takes place to well-being and whether the methodology for this is through coaching.

Furthermore, several interesting and useful theoretical frameworks, such as Adult Learning Theory (e.g. transformative learning: Kolb, 1984; Mezirow, 1991) and Behavioural Change (Albert Bandura, 1977; Peterson, 2006) have been presented and assessed for their usefulness in influencing the research design. These theories will provide a useful foundation on which to build the empirical research and also to provide a deeper understanding to analyse and interpret the findings.

2.9 Measuring well-being

Although there is an extensive evidence base about what constitutes well-being, there is no consensus about the components of well-being, this provides issues within research for a single clear and rigorous standard for measuring well-being. There is agreement however that although it is an emerging science, it is an important area that needs to be measured (Diener, 2006).

Measurement of well-being seems to date back to the ground-breaking study carried out by Bradburn (1969) which focused on happiness as the outcome variable and the balance between positive and negative affect. However Ryff (1989) influenced in part by the work of Jahoda (1958), explored the concept of what might be missing in the definition of psychological well-being, she argued that preceding perspectives could be integrated and subsequently created the

Scales of Psychological Well-being which have been influential in many subsequent measures.

2.9.1 Measures of Psychological Well-being

Ryff's scales of Psychological Well-being (1989), Ryff and Keyes (1995)

This scale was designed to measure six theoretically motivated constructs of psychological well-being:



Figure 9: Ryff Scales of Psychological Well-being (Ryff, 1989)

Ryff argued that “early conceptions of well-being suffered from limited theoretical grounding and empirical testing, leading to neglect of important facets of psychological health” (Ryff, 1989, p.1077). Ryff tested the 6 constructs with 321 respondents, not all of the measures showed convergence with prior indexes of

well-being (most notably: autonomy, positive relations with others, personal growth and purpose in life). *“These findings support the claim that key aspects of positive psychological functioning emphasized in theory have not been represented in the empirical arena”* (Ryff, 1989, p.1077). The research presented by Ryff has been widely influential in subsequent measures of well-being and has moved the emphasis from short term measures of well-being i.e. happiness, to more enduring life challenges such as achieving satisfying relations with others, direction and sense of purpose.

2.9.2 Measures of Subjective Well-being

Bradburn (1969); Watson and Clark (1988); Diener, Diener and Diener (1995); Diener et al., (2009)

The measures above are exclusively concerned with measuring the eudaimonic/psychological aspects of well-being i.e. functioning well. Along with others (e.g. Bradburn, 1969), Diener who has been a prolific researcher in the field of well-being equated positive human experience with the hedonic (subjective) aspect of well-being alone, *“subjective well-being is a broad concept, that includes experiencing pleasant emotions, low levels of negative moods, and high life satisfaction. The positive experiences embodies in high subjective well-being are a core concept of positive psychology because they make life rewarding”* (Larsen and Eid, 2008, p. 63).

Measures of emotions are generally considered within the subjective well-being measures and have been popularly utilised within coaching research (e.g. Green, Oades and Grant, 2005, 2006; Spence and Grant, 2005). The most popular scale

of emotions is the Positive and Negative Affect Scale (PANAS: Watson and Clark, 1988). This is a 20-item measure of both positive affect (the extent to which the person feels emotions such as being interested, enthusiastic and alert) and negative affect (the extent to which the person experiences emotions such as feeling, guiltily, afraid or nervous).

Further to the PANAS scale, Diener, Diener and Diener (1995) created the Satisfaction with Life Scale (SWLS) which is a well validated measure that asks participants to respond on a 7-point scale (1=*strongly disagree* to 7= *strongly agree*) to five statements that allows participants to rate domains of their life in terms of their own values.

Both of the above measures have been extensively used to measure subjective well-being, However, Diener et al. (2009) also created SPANE (Scale of Positive and Negative Experiences) which offers six items to assess positive experiences and six items to assess negative experiences. They argued that the issue with PANAS is that *'the items are all high arousal feelings, and many are not considered emotions of feelings'* (Diener et al., 2009, p. 145). In response, the SPANE reflects full levels of arousal for both positive and negative feelings. They found the scale to converge well with other measures of affective well-being and emotions, other researchers have also found positive validity of this scale (e.g. Jovanović, 2015).

2.9.3 Combined Psychological and Subjective Measures:

Flourishing Scale

Diener et al., (2009, 2010); PERMA Scale (Seligman, 2011)

While Diener et al. historically have focused on the exclusively subjective aspects of well-being, in 2009 they added to their measurements, components of “flourishing” which represent both (within a single score) the psychological and subjective elements of well-being including: positive relationships, purpose in life, competence, engagement, self-acceptance, optimism, and contribution towards the well-being of others, and being respected. This is more commonly known as the “Flourishing Scale”¹ (Diener et al., 2010). This scale had a good level of convergence with other measurements e.g. Ryan and Deci (2000) Basic Needs Satisfaction and Ryff’s (1989) Scales of Psychological Well-being. Being only eight items, it provides an easy way to measure broad and important aspects of human functioning. Interestingly, when comparing the eight items with previous definitions of well-being (e.g. Huppert and So, 2009; Michaelson, Abdallah and Steuer, 2009; Seligman, 2011), there is much convergence. However, it excludes suggestion by Seligman (2011), Michaelson et al. (2009) and Huppert and So (2009), that positive emotion, emotional stability, resilience and vitality are important aspect of well-being (although positive emotion is included within the separate although complimentary Positive and Negative Experience (SPANE) as discussed above). Diener et al. (2010) does suggest that contribution towards the well-being of others and being respected are important components of flourishing and this is an interesting and welcome addition to the measures

¹ (note should be taken not to confuse this with the Flourishing Scale (Huppert and So, 2009))

already established and also supports previous suggestions by Keyes (2005) and Ryff (1989), however, no previous or subsequent measure have included it.

Other researchers also take a less exclusive hedonic/eudaimonic approach, for example, Keyes (2002) combines hedonic measurements with Ryff's eudaimonic measures and 5 dimensions of social well-being, while Aristotle's notion of happiness includes both perspectives of functioning well and feeling good (e.g. Helliwell, 2003). Following on from this, Seligman (2002) has developed his work to propose five elements of well-being which encompasses both psychological and subjective well-being and move the well-being debate from "happiness" to "flourishing", including: pleasure, engagement and meaning and subsequently adding: relationships and accomplishment (Seligman, 2011). This more commonly became known as the acronym PERMA and according to Seligman, it is these five elements that define well-being (Seligman, 2002, 2011).

2.9.4 National Accounts of Well-being

In 2004 and 2005 there were calls from both the New Economics Foundation (NEF) and the UK economist, Richard Layard, for the governments to monitor the well-being of their citizens. In 2009 NEF published *National Account of Well-being: bringing real wealth onto the balance sheet* (Michaelson et al., 2009) which utilised data collected from a major 2006/7 European Social Survey representing a comprehensive dataset on subjective well-being from 22 participating European countries, containing detailed measures of individual experiences of over 40,000 people. A key aim was to measure both the subjective and psychological aspects of feeling good and functioning well, furthermore, 'to go beyond individualistic

aspects of well-being, by incorporating measures of social or interpersonal well-being' (Huppert et al., 2009, p. 6). This and other measures of well-being discussed previously have moved away from single question measures (i.e. on a scale of 1-10, how happy would you say you are?) which few researchers would claim to be sufficient (a) because the nature of well-being is multidimensional, (b) in the field of psychometrics, the use of a single question to measure data invites a high risk of errors. In addition, there is the possibility of bias, and need to focus on the wider understanding of how people experience their lives. Therefore, in this case, the National Accounts of Well-being included the aspects of personal well-being and social well-being with a satellite indicator of well-being at work which further add to the rigour and breadth of this measurement (see Fig. 10).

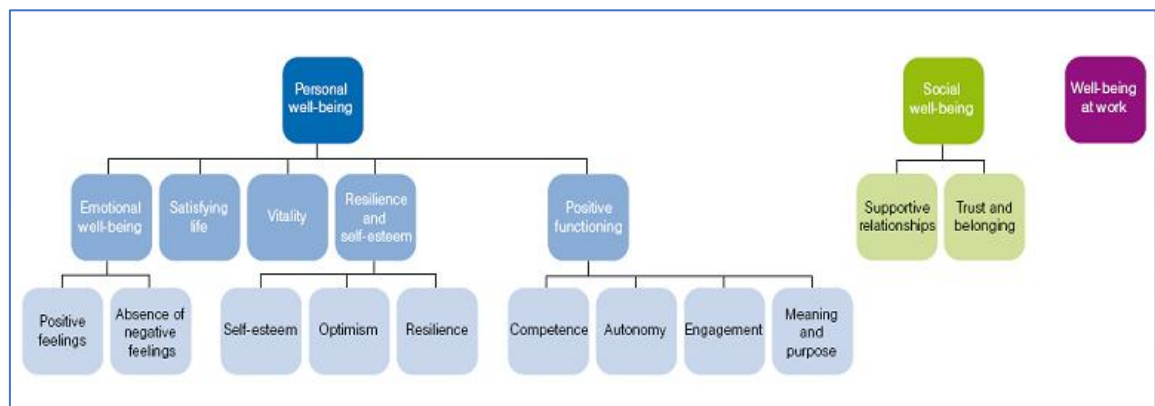


Figure 10: Indicator structure within the example national accounts framework (Michaelson, Abdallah and Steuer, 2009, p.21).

According to the National Accounts of Well-being (Michaelson et al., 2009, p.18),

“Well-being is most usefully thought of as the dynamic process that gives people a sense of how their lives are going through the interaction between their circumstances, activities and psychological resources or ‘mental capital’. Whilst a combination of objective and subjective factors are important for assessing well-being, it is the subjective dimensions which have, to date, been lacking in any assessment by national governments. National Accounts of Well-being address this gap.”

This set of measures, whilst far more cumbersome than for example, the eight item Flourishing Scale, (with around 50 questions resulting in eight indicators), offers an opportunity to cover wider measures than previously demonstrated. It includes subjective, psychological, social and well-being at work measures; Diener et al.'s (2010) measures (with the exception of contributing to the well-being of others); plus emotional well-being, resilience, vitality and respect as suggested as the missing components above (see Fig. 11).

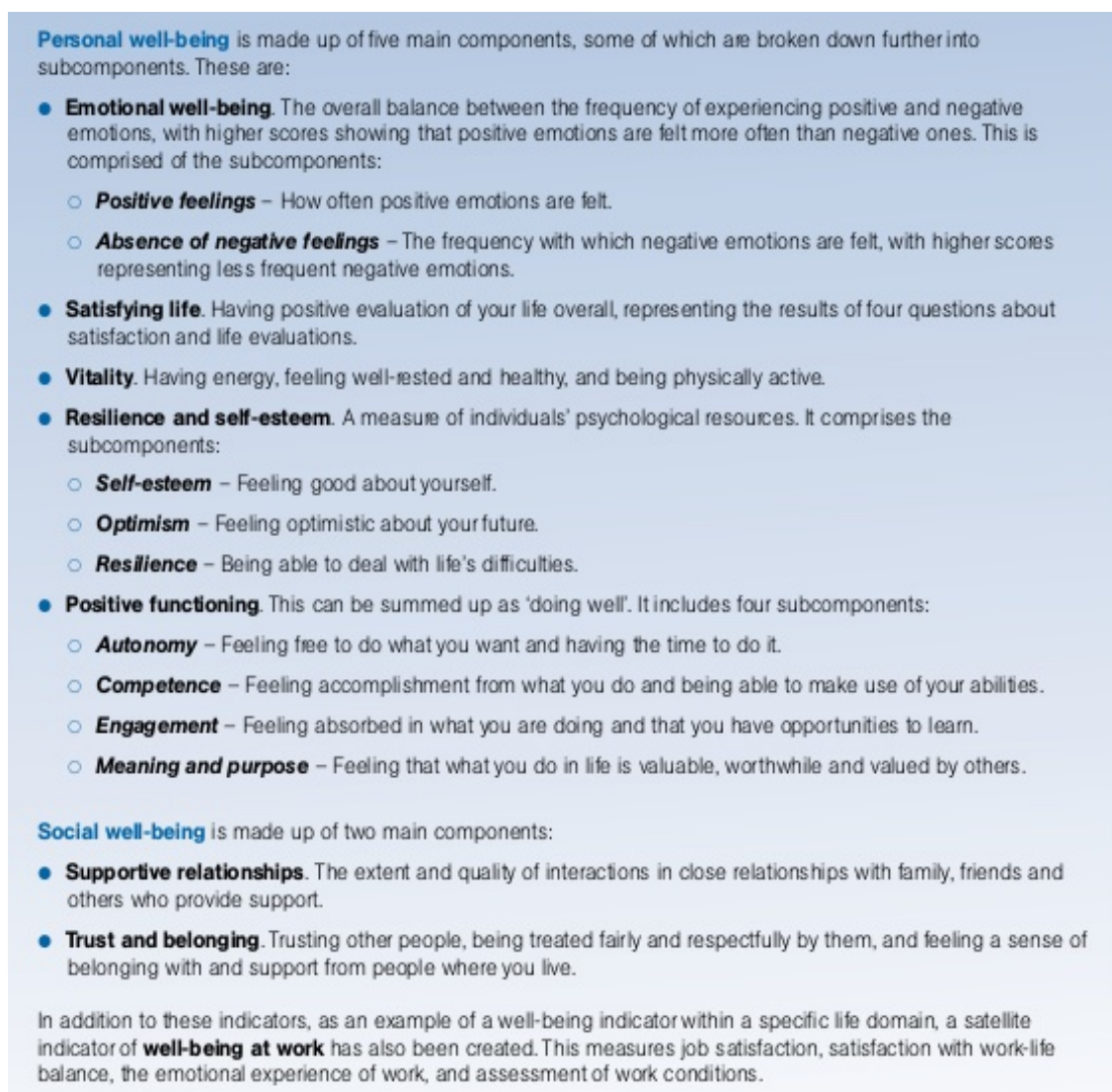


Figure 11: Measures from the National Accounts of Well-being Framework (Michaelson, Abdallah and Steur, 2009, p.21)

The National Accounts of Well-being have provided evidence-based measures which have been used to influence the measurement of well-being on a national basis. Furthermore, by linking to the evidenced “five ways to well-being” (Marks et al., 2008) (see section 2.10) they provide relevant examples to promote positive mental health (e.g. as a framework for Liverpool’s “year of well-being”). Interestingly, the National Accounts of Well-being doesn’t seem to have the extensive use as a measure for well-being for which it was intended. The interactive tool on the website: www.nationalaccountsofwellbeing.org doesn’t work and this means the tool is unlikely to be used in the future. Furthermore, it was hoped that there would be production of a second National Accounts of Well-being for Europe but to date, this doesn’t appear to have materialised. However, the European Social Survey on which the National Accounts are based, has continued with the well-being module and repeated the survey in 2013 (round 6) to measure both personal and social well-being to capture hedonic and eudaimonic well-being, the research which relates progress over the course of the two well-being modules (round 3/6) is also yet to be reviewed.

2.9.5 Summary to section

This section has provided an overview of the main measurements of well-being taking into account exclusively psychological/subjective measures as well as the more recent combined measures of mental well-being. These measures add to the literature confirming the definition and content of mental well-being whilst also providing the means by which to measure progress.

2.10 Well-being Interventions

While there has been extensive research into the definition of well-being and what it constitutes, the evidence base into how one can acquire mental well-being is an area for development. The Mental Capital and Well-being Project (2008) has provided the largest analysis of evidence for the most important drivers of mental capital and well-being with the aim to develop a long-term vision for maximising mental capital and well-being in the UK for the benefit of society and the individual (Marks et al., 2008). From the evidence that was collected, the Centre for Well-being at the New Economic Foundation (NEF) were commissioned to develop a set of evidence-based actions to improve personal well-being. They came up with a well-being equivalent to “Five fruit and vegetables per day”. Based on an extensive review of the evidence, they suggested the following to improve personal well-being:



Figure 12: Five Ways to Well-being: (Marks et al., 2008)

The five areas identified in the Five Ways to Well-being provide evidence of how to influence well-being. They have been marketed in a manner which has given them wide appeal and made them very accessible. Although this has implications for well-being practitioners, the widest contribution for the Five Ways to Well-being has surprisingly been through individual and organisational take-up. This arguably is because the resources were made freely available and provided an easy to understand and low-cost way for organisations and individuals to promote and improve mental well-being. Over ten years later, the Five Ways to Well-being

are widely acknowledged and utilised within a wide spectrum of fields, from education to healthcare. They contribute to the existing evidence about what supports well-being and provide a framework for future work in this field. But, as acknowledged by Marks et al. (2008), the evidence base is limited (see Appendices for an overview of the literature for each action). While the Five Ways to Well-being have highlighted communication around well-being activities, further insight into each of the intentional activities (not just the behaviours associated with the Five Ways to Well-being but also the cognitions, needs and emotions as suggested by Lyubomirsky, (2001)) may provide a useful addition to the literature. This will determine the underlying mechanisms that impact on the adoption and success rate of these interventions and provide frameworks on how the Five Ways to Well-being are integrated into individual priorities and workplace initiatives. The next section will present the literature around workplace coaching and it is suggested that coaching may provide a framework around well-being which gives employees the tools to undertake actions that lead to positive well-being outcomes.

2.11 Summary to well-being section

The research presented in the sections above demonstrate a growing field of understanding about what defines and contributes towards well-being and mental well-being, in particular. Mental well-being incorporates key elements of feeling good and functioning positively, contributing to one's society and extends the concept of happiness to the notion of flourishing. A focus on the positive aspects of mental well-being has only been on the agenda for the past two decades and presents an ongoing opportunity to develop this research further in understanding

not only what constitutes mental well-being, but more importantly the specific areas and how they can be influenced. Interventions such as those within positive psychology and coaching present opportunities to demonstrate any influence (positive, negative) upon mental well-being and whether, rather than mental well-being being an area for definition and measurement, mental well-being becomes an area for change.

2.12 Literature – Workplace Coaching

As already mentioned, coaching has been suggested as a suitable methodology for enhancing well-being (e.g. Grant, 2003). This section will cover an understanding of workplace coaching (herein referred to as ‘coaching’) and its application to the benefit of well-being.

There are many varied definitions of coaching, Hall, Otazo and Hollenbeck (1999) state that executive coaching is *"a practical, goal-focused form of personal one-to-one learning for busy executives. It may be used to improve performance, to improve or develop executive behaviors, to work through organizational issues, to enhance a career, or to prevent derailment"* (p. 40). However, Grant (2003) encompassed several important features of coaching into a more generic definition: a *"results-oriented, systematic process in which the coach facilitates the enhancement of life experience and goal attainment in the personal and/or professional life of normal, non-clinical clients"* (Grant, 2003, p. 254). This is a useful definition as it can be applied equally to different domains of coaching e.g. personal, executive or organisational; it emphasises a focus on results, processes, self-direction, and distinguishes it from therapy by its focus on a non-

clinical population (for more on the debate between coaching and therapy see: Hart, Blattner and Leipsic, 2001; Brunning, 2006; BONO et al., 2009). Similarly, Spence and Grant (2007) introduce the specific concepts within coaching by suggestion that it is an *“action-oriented, collaborative process that seeks to facilitate goal attainment, self-directed learning and/or enhance performance in the coachee’s personal or professional life”* (Spence and Grant, 2007, p.1009).

However, the most widely-used definition seems to be: *“unlocking people’s potential to maximise their own performance. It is helping them to learn rather than teaching them.”* (Whitmore, 2009, p.10). This has a positive emphasis on people’s performance, places an emphasis on the coachee rather than the coach in making that change, and recognises a difference between learning and teaching. Whitmore (2009) further reflects this by placing an emphasis on *self-awareness* as an important component within coaching. It also broadens the scope of coaching so that it isn’t limited to solution focused, cognitive behaviour coaching which underpins the work of Spence and Grant (2007) among other researchers.

Although there is a lack of agreement among coaching professionals about precise definitions, if someone acknowledges the following to be true after a conversation, they would probably accept that it was coaching (Starr, 2008): *“the focus of the conversation was primarily about themselves and their circumstances; their thinking, actions and learning benefitted significantly from the conversation; they were unlikely to have had those benefits in thinking or*

learning within that time frame if the conversation hadn't happened" (Starr, 2008, p.5)

According to Grant et al. *"the coaching process facilitates goal attainment by helping individuals to: (i) identify desired outcomes, (ii) establish specific goals, (iii) enhance motivation by identifying strengths and building self-efficacy, (iv) identify resources and formulate specific action plans, (v) monitor and evaluate progress towards goals, and (vi) modify action plans based on feedback"* (Grant et al., 2010, p.3). In other words, it is about instigating behaviour change and working with the coachee to monitor and evaluate progress towards the goals (a key process in creating intentional behaviour change: Carver and Scheier, 1998)

The majority of coaching research tends to focus around the aspects of process and techniques, which generally aim to reinforce the value of coaching as an intervention (Passmore, Fillery-Travis, 2011). Witherspoon and White (1996) suggest that coaching can be applied to one of three main categories: skills, performance and developmental coaching. Skills coaching focuses on the development of a specific, designated skill set, for example in areas such as giving presentations, communication, or sales skills. Performance coaching focuses on improving performance over a specific timescale. It may be part of a performance review in the workplace, or for a specific project and will focus on the coachee setting goals, overcoming obstacles, monitoring and evaluating their performance improvement. Developmental coaching, similar to performance coaching, deals with the coachees personal and professional development and is aimed at the coachees ability to meet current and future challenges more

effectively. It involves reflecting on current issues, options and formulating action plans to support their development.

Theeboom, Beersma and Van Vianen (2014) argue that the goal of coaching is to optimise a person's functioning at work. It can also work to improve organisational effectiveness through the perceptions and attitudes of employees. For example, coaching may facilitate cognitive "reframing" of a work experience, which is a core aspect of coaching (Grant, 2001b). Additionally, coaching may enhance organisational effectiveness through goal directed behaviour (Grant, 2003).

2.13 Application of coaching in the workplace

Within the workplace, coaching is a widespread and respected part of HR and management practice (Chartered Institute for Personnel and Development (CIPD), 2012) and has many applications. This can include executive and non-executive coaching delivered by an in-house or external coach. Additionally, within workplace coaching, managers are sometimes trained in coaching skills (separate to using coaching skills within their normal managerial duties) (Grant et al., 2010). The CIPD learning and development survey (CIPD, 2015) suggests that just over three-quarters of organisations are offering coaching or mentoring (up to 89% in the public sector) and this is on the increase along with its recognition as one of the most commonly used and effective talent management activities.

2.14 Coaching Models

(See appendices for further details of each model)

Coaching models have been developed from many diverse fields with varying objectives. Ives (2008) brought together a summary of the approaches suggested by Stober and Grant (2006) which are outlined in Figure 13, this demonstrates the many types of coaching and also varying focus and definitions.

Type of coaching	Objective of coaching
Humanist	"Coaching is above all about human growth and change" (Stober, 2006
Behaviourist	"The purpose of coaching is to change behaviour" (Peterson, 2006 p.51)
Adult development	Coaching is about helping clients develop and grow in maturity
Cognitive coaching	Coaching is foremost about developing adaptive thoughts
Goal-focused	"Coaching is a goal-oriented, solution-focused process" (Grant, 2006 p.
Positive psychology	"Shift attention away from what causes and drives pain to what energises and pulls people forward" (Kauffman, 2006 p. 220)
Adventure coaching	Stretching the client through entering into challenging situations and the learning that arises.
Adult learning	A learning approach that helps self-directed learners to reflect on and grow from their experiences
Systemic coaching	"Coaching is a journey in search of patterns" (Cavanagh, 2006 p. 313)

Quotes selected from Stober & Grant (2006).

Figure 13: Approaches to coaching (Ives, 2008, p.102; Stober and Grant, 2006)

Depending on the school of study, various models of how to structure a coaching session will be taught, however, as has been seen in previous research (e.g. Dembkowski and Eldridge, 2003; Palmer, 2007b) the goal-focused models of coaching tend to be most widely recognised and Whitmore's (1992) Grow model is probably the most well-known of the goals models. This approach to holding a coaching conversation includes for instance, exploring what the client's wants

to achieve from the coaching (GOAL), their current situation (REALITY) and raising awareness about this along with their options for finding a solution (OPTIONS). The final step looks at their immediate actions to be taken towards their identified goal (WILL). This approach integrates aspects Whitmore considered essential as the goal for the coach: “Building awareness, responsibility, and self-belief” (Whitmore, 1992, p. 18). Its’ popularity does not imply that it is the only or most suitable model, or that alterations to its structure are to be avoided. Grant (2011) usefully points out that the focus of most coaching models is with regard to a single session and that *“we need coaching session models that recognise the iterative nature of the coaching engagement and explicitly provide a framework for incorporating the learning from the prior session into the current session”* (Grant, 2011). It is with this in mind that he proposed that the GROW model became RE-GROW to incorporate “review” and “evaluate” into the preliminary stages.

Alternatively, Dembkowski and Eldridge (2003) developed the GROW model into ACHIEVE. This expands upon the attention given both to the Options and Will stage with the additional focus to initiating and evaluating options and then turning these into valid action which encourages momentum. It does seem however to place less emphasis on understanding the client’s reality although this has been amalgamated into the subsequent stages. What both of these models lack is a focus on emotions.

Drawing evidence from psychological models, many of the models seen in the coaching literature use a cognitive behavioural framework (instead of goals-

based). This approach *“aims to help clients gain a perspective about whatever is at the root of that person’s difficulty. Coach and client work together to identify what might be stopping an individual from reaching his or her full potential and what action is need to take charge of their situation”* (McMahon, 2017). It emphasises the importance of thoughts, beliefs and client perceptions and may use various models, for instance OSKAR (Jackson and McKergow, 2007). Alternative cognitive behavioural models are also ABCDE (Ellis et al., 1997; Palmer, 2002). Edgerton and Palmer (2005) developed the SPACE model and Palmer (2007b) created the PRACTICE coaching model. These models place a firmer emphasis on an individual’s interpretation of events i.e. thoughts, beliefs and emotions which then drive the client towards their goal, as opposed to other coaching models which start with the goal as the initiator of the coaching. Each approach has its merits, but less is known about the comparative effectiveness of favouring one or other of these approaches to impact on well-being. What is apparent is that Cognitive Behavioural Solution Focused (CB-SF) coaching has been shown to be more effective in improving well-being than just cognitive or behavioural coaching (Grant, 2001b) which neatly combines both the benefits of the cognitive behavioural coaching with the addition of a solution-focused outlook.

As discussed within section 2.7.7, Dias, Palmer and Nardi (2017) have suggested an integrated model of cognitive behavioural coaching that also encapsulates key aspects of both positive psychology and the solution focused approach. This has the benefit of focusing on strengths and positive emotions and questioned within the model, is whether a further benefit would be the links with well-being

associated with positive psychology. The authors suggest that Integrative Cognitive-Behavioural Coaching (ICBC) can be defined as

“a model of psychological coaching based on the principles of the cognitive-behavioural approach but which also actively acknowledges and utilises principles and techniques derived from PP and the SF approach: it therefore works towards the identification of values and the enhancement of authentic strengths for an experience of being that is more meaningful and purposeful” (Dias, Palmer and Nardi, 2017, p. 3).

This model appears to synchronise very well with the existing research into coaching outcomes as well as the evidence base demonstrating validity of each perspective, for instance, (Green et al., 2014) compared both positive psychology interventions and CB-SF programmes and this demonstrated that positive well-being outcomes were associated with the positive psychology intervention whereas increased academic goal striving was found from the CB-SF coaching approach. One would naturally consider whether combining these approaches could lead to improved outcomes on both accounts. Research into the effectiveness of this approach is warranted to enable academic validation and status.

Whilst, as can be seen, there are several frameworks for structuring a coaching session, there is still very little research into the use of session structures in terms of comparing outcomes or the comparative effectiveness of these models.

2.15 Coaching Outcomes

Evidence around the validity of coaching demonstrates that the majority of research into well-being outcomes from coaching has been positive, with significant effects on well-being outcomes (Theeboom, Beersma and van Vianen, 2014; Grover and Furnham, 2016). Specifically, findings demonstrate that coaching can improve well-being through enhancing psychological and subjective well-being (Green et al., 2006; Spence and Grant, 2007) and improving resilience (Grant et al., 2009). Further research includes the impact of coaching on: anxiety, depression and stress (Gyllensten and Palmer, 2005), self-efficacy, goal attainment, mental health (Grant, 2003), goal striving, well-being and hope (Green, Oades and Grant, 2006), mental health and cognitive hardiness (Green, Grant and Rynsaardt, 2007), psychological distress (Duijts et al., 2008) satisfaction with life (Spence and Grant, 2005), resilience and workplace well-being (Grant et al., 2009), and psychological well-being (O'Connor and Cavanagh, 2013).

While coaching has been seen as effective in several studies, these have tended to relate to areas of positive affect e.g. goal attainment (e.g. Grant, 2003; Spence and Grant, 2005; Green, Oades and Grant, 2006). When it comes to the impact of coaching on negative affect e.g. stress, the results are less favourable (e.g. Gyllensten and Palmer, 2005; Green et al., 2007). However, among the various research studies there is little consistency, including differentials between the number of coaching sessions, sample size, a lack of a control group, and environmental factors, all of which contribute towards a need for further rigorous research.

Several of the studies don't use randomisation and as such may differ in ways that could influence the results (Beehr and O'Hara, 1987), factors such as characteristics of coaching clients, type and duration of coaching could have an influence on the results. As suggested by Howard et al. (1996) this could be overcome by replicating the study. This replication has helpfully been undertaken by Grant et al., whom carried out several studies in the field of cognitive behavioural coaching. In particular, the study of Grant et al. (2003) is a useful contribution as it has been repeated by Spence and Grant (2005), and Green et al. (2006) through the addition of 1-2-1 coaching, professional and peer coaching, and a randomised control group. They showed consistent results in well-being, demonstrating significant increases in goal attainment and quality of life measures. These studies contribute to the evidence for the use of coaching to improve well-being outcomes and have paved the way for further research into contributory factors such as how coaching achieves results.

2.16 What contributes to the efficacy of coaching?

Efficacy referred to throughout this thesis relates to the ability of the method of coaching to result in positive outcomes to well-being. There is sufficient research to reasonably suggest that coaching works as a methodology for improving well-being, however, as suggested by Fillery-Travis and Lane (2006), it is time to move the question from "does it work?" to "how does it work?" This will help to guide further research as to understanding the mechanisms by which results are achieved. It is in aiming to explore this question that further contribution towards the research surrounding the efficacy of coaching and coaching psychology can be explored.

The question of coaching efficacy is perhaps best explored by considering the moderators and mediators of effectiveness in coaching. A moderator is defined by Baron and Kenny (1986, p.1174) as a “*variable that affects the direction and/or strength of the relation between an independent or predictor variable and a dependent or criterion variable*”. Whereas they suggest that a variable may be defined as functioning as a mediator where it “*accounts for the relation between the predictor and the criterion. Mediators explain how external physical events take on internal psychological significance...(w)hereas moderator variables specify when certain effects will hold, mediators speak to how or why such effects occur*” (p.1976). Therefore, in terms of coaching research, a moderator could be factors such as the type of coach (internal or external) and a mediator could be factors such as goal orientation. However, it should be noted that it is very difficult within current literature to obtain a clear definition of which aspects fall into which category, yet there is agreement that both moderators and mediators will contribute to the efficacy of coaching and are important factors in developing the evidence base for coaching. Furthermore, research needs to be conducted to account for the impact of these in order to determine the precise causality of change and therefore the effectiveness of coaching. An overview of research from both coaching and psychotherapy (where greater amounts of research in this area have been undertaken) is considered below.

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

Research	Topic	Mediator
(Smither et al., 2003; Stewart et al., 2008; Stewart, O’Riordan and Palmer., 2008; Jones, 2015)	The client:	readiness for coaching; personal (life/work) experience; personality; self-efficacy; sharing feedback and soliciting ideas
(Scoular and Linley, 2006; Baron and Morin, 2009, 2012; Boyce, Jackson and Neal, 2010; de Haan, Culpin and Curd, 2011)	The relationship between the client and the coach	Working alliance, personality match, quality of the relationship, similarity, coach credibility, self-ratings of the relationship
(Sherer et al., 1982; Anderson and Betz, 2001)	Expectations	Client self-efficacy expectations
(de Haan, Culpin and Curd, 2011; Jones, Woods and Guillaume, 2016)	Theories and techniques used	effectiveness of the conversation and general techniques common to coaching - found to have an impact rather than the techniques or intervention. Coaching without multisource feedback found to have a greater effect on outcomes.

Research	Topic	Moderator
(Theeboom, Beersma and van Vianen, 2014; Jones, Woods and Guillaume, 2016)	Number of coaching sessions	no effect for the number of sessions or longevity in weeks of the coaching intervention
(Jones, Woods and Guillaume, 2016)	Format of coaching	No difference found for face-to-face compared with blended coaching formats
(Sue-Chan and Latham, 2004; Jones, Woods and Guillaume, 2016)	Type of coach	Internal coaches found to yield more favourable results (Jones et al., 2016) whereas Sue-Chan and Latham (2004) found more favourable results from external coaches along with greater ratings of credibility.

Table 1: Moderators and Mediators of Coaching Efficacy (© Sydenham, 2020)

While a growing amount of research has been undertaken into general coaching efficacy, as has been suggested throughout this thesis so far, there is potential to explore the moderators and mediators of coaching efficacy in order to understand when, how and why coaching may impact upon mental well-being. Of these variables, it is the mediators which are of greatest interest to this thesis. This is because, as already stated, the coaching literature needs to move from does it work, to how does it work? While the moderators inform the literature in terms of the conditions when coaching works, it is the mediators which really identify the causal mechanisms between coaching and well-being outcomes. The above research points in this direction, for instance De Haan (2008) using a link to psychotherapy, suggested that an effective coach exhibits a strong relationship between therapist and client, commonly known as the “working alliance”; the quality of this relationship may mediate the impact on well-being. In addition, there is potential to further explore mediators through the process and techniques of coaching. Some development in this area has been gained through, for instance, cognitive behavioural solution focused coaching (e.g. Grant and Greene, 2001); goal attainment and the impact on life satisfaction (Diener and Emmons, 1984); thought recognition (Kelley, 2011); and the use of strengths in goal pursuit (Linley et al., 2010). Both the process and techniques of coaching will be outlined in further detail below.

Cognitive-behavioural solution-focused coaching has been cited in several of the studies as being an effective approach to improving well-being, goal attainment and self-awareness. In particular, Grant and Greene (2001) self-help book “Coach Yourself” is utilised which is based on principles of cognitive-behavioural

approaches to counselling and coaching psychology. They claim that this approach raises the importance of “*solution construction rather than problem analysis*” (Grant, 2003, p. 255) and recognises four domains of human experience: thoughts, behaviour, feelings and the environment. Grant et al. (2009) suggest several mechanisms (in this case, achieved through coaching) which increase well-being: goal attainment - particularly if the goals are personally valued (Sheldon et al., 2001); social support and a sense of autonomy, both central to the coaching process, are suggested to buffer the impact of stressors on well-being (Daniels and Guppy, 1994); and self-acceptance (Donaldson-Feilder and Bond, 2004).

Gyllensten and Palmer (2005) suggest that the self-regulation cycle of monitoring and evaluating progress towards goals, contributes towards self-confidence and resilience, while Green et al. (2007) suggested that coaching through the self-regulation cycle helped participants to enhance their life experience, build hope and resilience. Added to this, Govindji and Linley (2007) emphasise the use of signature strengths (that is strengths which are concordant with one’s intrinsic interests and values (Linley et al., 2010).

Diener (1984) suggests there is a strong correlation between goal attainment and life satisfaction and the evidence seems to repeatedly demonstrate this (e.g. Grant et al., 2010). This may also account for the wide-spread use of Whitmore’s Grow (1996) and Re-grow (2002) models, with the G standing for Goal. Although goal attainment and life satisfaction are correlated, there is conflicting evidence as to the importance of stated goals if improvements are to be seen in well-being.

For example, Grant, Curtayne and Burton (2009) demonstrated an improvement in well-being even if it is not the stated goal, and Grant (2003) demonstrated that although mental health enhancement and life quality were not specifically targeted, these appeared to improve as a result of the coaching programme. However, Green, Grant and Rynsaardt (2007) specifically focused on helping participants find ways to enhance their life experience and build hope and resilience, rather than reducing stress or anxiety. Life coaching was associated with significant increases in cognitive hardiness and hope and significant decreases in depression. Anxiety and stress recorded no significant changes, this implies that it is important to include a focus on stress/anxiety if changes are to be noted in that area and presents interesting potential for future research into the focus of interventions i.e. positive and negative affect, and any subsequent impact on well-being. This is especially as stress and well-being are often discussed interchangeably. It is furthermore reinforced by Grant and O'Connor (2018) who found that positive affect coaching questions were more effective than coaching questions focused on the problem and performed even better when positive affect and solution focused questions were combined.

Significant positive relationships have also been found between thought recognition and psychological well-being (Banks, 2001, 2005, 2006, 2010; Sedgeman and Sarwari, 2006; Kelley, 2011; Kelley and Pransky, 2014). *“Evidence has coalesced around the idea that the ultimate answer to stress may not lie in addressing external stressors but in exploring and enhancing internal human capacities”* (Sedgeman 2005, p. 48). This approach, also known as the *Three Principles* has as its underlying principle, that previous assumptions about

stress are “inherently flawed.” It proposes an inside-out approach, looking at how and why the experience of stress comes from inside us rather than from external factors (Sedgeman 2005).

“Current therapeutic methods concern themselves with what people think and how people deal with what they think, and what has caused them to think the way they think, all of which exist in the realm of already-created experience. HR/IH addresses the fact that people think, which represents the fundamental course of experience, experience inchoate” (Sedgeman 2005, p. 49).

This supports the prediction that participants’ thinking will increase as their level of thought recognition increased and that this would result in higher psychological well-being and more functional behaviour. Pransky (1997) says that greater thought recognition leads to a heightened sense of control over life experiences and an increased capacity to view things in a balanced way. Kelley (2011) also drew parallels to mindfulness and how in addition to the study by Spence et al. (2008), mindfulness has been related to numerous indicators of psychological health including higher autonomy and well-being (Carlson and Brown, 2005). Through mindfulness behaviours, individuals place less emphasis and attachments to their thoughts, therefore allowing them to flow through their mind and this in turn provides a less judgmental and defensive experience in life (Heppner et al., 2008).

The research into thought recognition is in its infancy and therefore carries inherent limitations (such as lack of a rigorous experimental design). Furthermore, the majority of this research has been undertaken from a counselling setting and therefore results may vary among “healthier” participants.

2.17 Summary of workplace coaching

The review of the literature above demonstrates engagement with a broad remit of research concerning coaching and well-being and provides some background information on the literature for these two areas. In summary, coaching can be defined as **a collaborative process by which the coach facilitates self-awareness, responsibility and well-being, which contribute towards goal attainment and flourishing of the client.** The research demonstrates that coaching may result in changes to: anxiety, depression and stress (Gyllensten and Palmer, 2005b); self-efficacy, goal attainment, mental health (Grant, 2003); goal striving, well-being and hope (Green, Oades and Grant, 2006); cognitive hardiness (Green, Grant and Rynsaardt, 2007); psychological distress (Duijts et al., 2008); satisfaction with life (Spence and Grant, 2005); resilience, workplace well-being (Grant, Curtayne and Burton, 2009); and psychological well-being (O'Connor and Cavanagh, 2013).

In addition to the outcomes of coaching, there is also research related to the mediators of coaching such as the components of CB-SF Coaching as suggested by Grant, Curtayne and Burton (2009) which increase well-being: goal attainment (Sheldon et al., 2001); social support, autonomy (Daniels and Guppy, 1994); and self-acceptance (Donaldson-Feilder and Bond, 2004)). The CB-SF approach also highlights the importance of thought recognition (e.g. Carlson and Brown, 2005) and solution construction (Grant, 2003). Further mediators of coaching have been discussed to include: self-regulation to monitor and evaluate progress (Gyllensten and Palmer, 2005); the use of strengths in goal pursuit (Govindji and

Linley, 2007); and the relationship between the coach and client (e.g. de Haan, Culpin and Curd, 2011).

The outcomes and mediators of coaching provide an initial framework on which to build knowledge about *how* coaching achieves results. However, if the fields of coaching and well-being are to be synthesised, it becomes apparent that there are some key themes and subsequent questions which address the efficacy of workplace coaching on mental well-being. The following section specifically addresses the key literature involving both coaching and well-being in order to address three key conceptual areas to identify the efficacy of workplace coaching as a methodology for improving mental well-being:

- (1) Does coaching change mental well-being? This theme was chosen because while the literature points to the direction that coaching has a positive impact on well-being, this outcome cannot be assumed and underpins further questions which emerge such as stated below.
- (2) What factors associated with coaching and its processes assist changes in well-being? The coaching literature (e.g. Fillery-Travis and Lane, 2006) suggest that the evidence now needs to move from the question of does coaching impact changes to well-being, to how does it work? This theme aims to explore the current coaching literature addressing not only the existing cognitive behavioural solution focused coaching, but also other forms and structures of coaching to understand whether it has been demonstrated how coaching works.

(3) What change takes place when a person experiences coaching? This theme explores whether the change process instigated through coaching is indeed a change to a well-being component, or a process that mediates the well-being outcomes. This question builds on the research to assess the efficacy of coaching in terms of not only which coaching process has the best results on well-being (question 2) but actually whether the change that subsequently takes place demonstrates its' efficacy. The next section will address the key literature for each of these themes in turn.

2.18 Coaching for Mental Well-being

2.18.1 Does coaching change mental well-being?

Anthony Grant et al. have researched extensively within the field of coaching and well-being outcomes, the key literature presented here explicitly addresses the above theme and is initially by Grant (2003) and then extended by Spence and Grant (2005, 2007), and Green, Oades and Grant, (2006).

Grant (2003) conducted research with 20 adults at an Australian university, a within-subject design, exploratory study was utilised which used life coaching as a means of exploring key metacognitive factors involved as individuals moved towards goal attainment. Participants met for 10, 50-minute weekly group coaching sessions and coached in the application of CB-SF techniques. The life coaching programme used was adapted from the Coach Yourself self-help book (Grant and Greene, 2001) and based on principles of cognitive-behavioural clinical and counselling psychology (Beck et al., 1979), and models of self-regulated learning (Zimmerman, 1989). They suggested that, in order to

overcome the alienation that may be associated with a psychopathology root, the Coach Yourself programme also incorporates aspects of brief solution-focused therapy (O'Hanlon, 1998).

Participation in the programme was associated with enhanced mental health, quality of life and goal attainment, levels of self-reflection decreased and levels of insight increased. However, this study used a self-report goal attainment scale and therefore it is not possible to objectively determine the veracity of reported goal attainment. This usefully was in some ways overcome by discussions at the weekly group coaching sessions. In addition, there was no control group, so effects could have occurred naturally, and the survey sample utilised just 20 Adults at one Institution, which may not have been representative of the general population.

Even though mental health enhancement and life quality were not specifically targeted, these also appeared to improve as a result of the coaching programme,

“This finding suggests that although the life coaching program was directed at the attainment of specific goals, the benefits generalised to participants’ broader life experience, and this provides preliminary evidence of the general value of life coaching in enhancing well-being, in addition to its more specific impact on goal attainment.” (Grant 2003, p. 260)

The study was repeated and improved by Green, Oades and Grant (2006) who hypothesized that a solution focused cognitive behavioural life coaching programme would lead to greater goal-striving, well-being and hope, and that these gains would be maintained over time. 56 adults took part in a solution-focused cognitive behavioural life coaching program, assigned to a randomised

controlled study including group-based life coaching or a waitlist control group (which wasn't previously included within Grant (2003) study). Coaching was shown to increase goal attainment, well-being and hope and a 30 week follow up found these gains were maintained. Consistent with Grant (2003) study, significant increases were seen in goal attainment and quality of life measures, although this study saw significant increases on all six scales of psychological well-being (Ryff, 1989).

It should be noted that, as with other studies (e.g. Grant, 2003), the sample who were self-selected, may not be representative of the general population and in this case, were volunteers and may have been particularly motivated to achieve their goals. Self-reported measures were utilised which carry potential for bias, which in this case was not overcome by techniques. Interestingly, the study highlighted the future potential for qualitative analyses to identify what aspects of the programme, participants believed to be most useful.

Spence and Grant (2005, 2007) also aimed to replicate the study of Grant (2003) and Green, Oades and Grant (2005) and extend it through the inclusion of 1-2-1 coaching and question whether life coaching improved measures of goal-striving, mental health, personality and metacognition. 63 participants were allocated to a professional, peer or waitlist control group. A solution focused, cognitive behavioural coaching approach was utilised with 10 weeks of coaching and an information evening. Seven coaches trained to post-graduate level within the Coaching Psychology Unit were selected to carry out the coaching in order to minimise the variability in coaching techniques and instructed to employ the

combined solution-focused, cognitive behavioural coaching (SF-CB) coaching approach. Group supervision was held fortnightly in order to ensure the coaching group following the correct SF-CB format, facilitated by an experienced coach who was otherwise uninvolved with this study. Those assigned to peer coaching attended the 1 day workshop, were given a peer co-coaching manual containing SF-CB coaching exercises (based on Grant and Greene, 2001; Grant and Cavanagh, 2002) and then attended 10 weeks of 75min co-coaching sessions. The report implies that some, but not all peer-coaching participants coached each other in dyads on weekday evenings consisting of a 15min review, and two 30minute co-coaching sessions. The group facilitator was present at all the coaching sessions but had minimal input, participants however were given guidance in suggested coaching questions using RE-GROW (an extension of Whitmore's, 1996 GROW model with the inclusion of Review and Evaluation sections).

Consistent with previous findings (Grant, 2003; Green, Oades and Grant, 2005) coaching, regardless of its format appeared to benefit those who received it, compared to those who didn't receive coaching. Increased levels of goal attainment, satisfaction with life, perceived control over environment factors, greater orientation towards new experiences, plus behavioural and cognitive flexibility were noted as the benefits. There were better results for professional coaching and goal attainment over peer coaching, interestingly, the peer-coaching group reported significant decreases in goal commitment. Spence and Grant (2007) offer that this may be due to the structure of the peer coaching, diluting the quality of the group experience; the quality of the coaching

relationships within the peer coaching, not being sufficient for dealing with critical issues in the coaching process and finally, that the groups did not hold uniformity of goals within the group and this may have led to little sense of common purpose.

Unlike Green, Oades and Grant (2005) findings were less impressive for well-being – only satisfaction with life and environmental mastery improved. Diener (1984) reports a strong relationship between goal attainment and life satisfaction, so this result is unsurprising, however, the latter improvement, that of environmental mastery offers a more interesting result: *“According to Ryff (1989), high scores on this dimension of well-being are indicative of individuals who are resourceful, capable of managing their environment and able to control complex external activities that help them to meet their needs and live according to their values”* (Spence and Grant, 2005, p.155).

Although the results claim to be less impressive for well-being, this is according to their measure using the Satisfaction with Life Scale (SWLS) (Diener, Emmons, et al., 1985), the Positive and Negative Affect Scale (PNAS) (Bradburn, 1969) and Ryff’s Scales of Psychological Well-being (Ryff, 1989). Other measurements may include aspects such that for example goal attainment, could be included as contributing towards well-being, which would give a very different result considering the significant improvement in goal attainment. This result is surprising but not unique; this study was goal focused and it explains that the result may in part be due to this focus rather than being around well-being, placing an importance on the goal and focus of the coachee. In addition, this research screened for mental health problems and could have been what they describe as

a relatively "happy" group. *"If so, participants may have been unable to reflect increases in well-being, as their already elevated scores could have created a ceiling effect"* (Spence and Grant, 2007, p.192).

These three studies have been highlighted as key studies of relevance because they form the foundations to suggest that coaching does have a positive impact on well-being and it is from these foundations that researchers have expanded the efficacy of coaching on well-being. The combination of the studies repeating the same design adds rigour to the findings as well as explores a variety of perspectives (1-2-1 professional coaching was seen to be more effective than peer coaching) and also gives insight into the coaching design (peer coaching using a cognitive-behavioural-solution-focused model with elements of self-regulated learning). All three of these studies utilise a quantitative methodology and therefore, lack explanations for why the results are as they are. For instance Spence and Grant (2007) note that they can only speculate why professional coaching was more effective than peer coaching and that it would be useful for future studies to capture data about these variables. They also suggest that, in agreement with Hersen, Michelson, and Bellack (1984) *"Indeed, it is likely that questions related to how coaching has its positive effects and the factors that effect it (i.e. process research) will be of greater long term interest than studies merely demonstrating that coaching does have positive effects (i.e. outcome research)"* (p.193). Another point of note is that the participants in each of the three studies were either university students or had responded to a local media advertisement advertising a life coaching programme, there is therefore the potential to explore similar results from alternative fields e.g. the workplace.

The second set of key studies which have been highlighted as important to this thesis address two key issues with the previous research presented: 1. That it lacked qualitative measures, and 2. Experiences of coaching in the workplace.

The research presented by Gyllensten and Palmer (2005, 2005a, 2006) explores experiences of coaching and stress in the workplace through quasi-experimental, correlational and interpretative phenomenological analysis. These three studies provide an in-depth insight into the impact of coaching on stress. Part I of the research investigated whether coaching reduced stress (it did not), Part II investigated whether there was a relationship between participation in coaching and levels of stress (it did not) and Part III used a qualitative methodology to gain deeper insights into the participant experience of coaching. Within Part III of the study it was suggested that as individuals work through the self-regulation cycle towards their goals, they overcome barriers and challenges and this is likely to improve self-confidence and resilience, and alongside this, the participants reported coaching effectiveness. Results from Grant (2003) also used the self-regulation framework in measuring the impact of coaching on goal attainment, metacognition and mental health and interestingly their results demonstrated that in addition to participation in the programme being associated with enhancement of all these measures, it specifically demonstrated that levels of self-reflection decreased and levels of insight increased.

Gyllensten and Palmer (2006) also identified that management of stress was a main theme within coaching and that this included four sub-themes: coping with stress, stress in the future, cause of stress and indirect work on stress. In other

words, the coachees had not necessarily sought coaching for stress but the coaching indirectly helped them by managing other work-related problems that were causing them stress. It also gave them improved confidence (which led to less worry); increased awareness (especially around work demands and their own limitations); it highlighted problems and discussing them gave them the opportunity to develop new solutions that in turn helped to reduce stress. Furthermore, it helped them prevent future stress by providing opportunities to discuss problems and find solutions. Finally, it helped them cope with stressful situations. It should be highlighted however that coaching had the potential to increase stress by focusing on the stressful areas and also that the relationship between the coach and coachee was highlighted as important in its success.

This research study is key because, although the studies found that coaching did not have a significant impact on depression, anxiety or stress, on exploring this through the phenomenological analysis, coaching was shown to have helped the participants reduce stress indirectly and was a resource that participants would consider using to cope with stressful situations. This discrepancy is not unusual, for example similar result have been reported in the CompassPoint Nonprofit Services (2003) study as well as similar findings by several other researchers (e.g., Grant, 2012; Grover and Furnham, 2016; Jones, Woods and Guillaume, 2016; Theeboom, Van Vianen and Beersma, 2017). Gyllensten and Palmer (2006) suggest that a possible reason for this could be due to the difficulty measuring reduction of stress in questionnaires. The difference in the results could also possibly be attributed to the nature of stress: if a coachee interprets a high workload or their living situation as stressful, it may be out of their control to

change this. What coaching offers is a way to cope with that situation; while the coachee may not be able to change things in the short term, coaching strategies can offer ways to manage the stress, for example a change of perspective, practical steps such as taking a break, or gaining support from colleagues may help them to indirectly reduce stress or cope with the excessive pressure. While these strategies may minimise the stress, they may not remove the stress entirely, therefore it is possible that when answering a questionnaire, they may still report high levels of stress whilst at the same time utilising coaching strategies to manage that stress.

While the research in this thesis is not looking at the area of stress, it is interesting to explore this research through the lens of an alternative approach – one question in particular is, whether it was the emphasis on negative affect e.g. stress (rather than positive affect e.g. well-being) that may have impacted on the results of these studies, and whether similar research but focusing on positive affect could present different findings? This set of studies have been chosen as the closest studies to this thesis to gain insights into the changes that the coaching evokes. It is possible that these changes are equally applicable to improving well-being as they are to reducing stress, for instance highlighting problem areas may give the coachee greater insights as to how they can improve their well-being.

The studies discussed above demonstrate the growing evidence that coaching does have a positive impact on mental well-being, including but not limited to: improved well-being, enhanced quality of life, mental health and goal attainment,

hope, cognitive hardiness, reduced depression and indirectly reduced stress. While the evidence suggests that coaching does indeed improve well-being, further research opportunities can explore existing evidence through qualitative methods and using alternative coaching frameworks (i.e. non CB-SF) which will build the understanding about the efficacy and process of coaching, especially with regard to the impact of coaching on mental well-being as well as understanding the change process that takes place.

2.18.2 What factors associated with coaching and its processes assist changes in well-being?

Within the literature, there is a general understanding of “coaching process” that refers to the actions or steps taken within coaching that achieve a particular end result. However, there are several further factors associated with the coaching process and how the coaching is carried out, that may impact upon well-being. Therefore, this section will include an overview of the literature concerning: the coaching process as assessed through different coaching/change models, core coaching components, as well as the coaching structure. These different aspects will be explored in terms of their impact in assisting changes in well-being. The purpose of including a broader definition within this question is that it acknowledges that, while the steps taken during coaching, for instance following the GROW model (goals, reality, options, way-forward) (Whitmore, 1992, 1996), may have an impact on well-being outcomes, there are further considerations that may be assumed within the coaching process (e.g. the importance of goals or other components as central to the coaching) and also within the structure (e.g.

whether it is an internal or external coach). Therefore, the broader definition aims to provide a clearer picture of the factors that impact upon the coaching.

Most of the research stated in the sections above utilises a CB-SF coaching model and this has been shown to be effective in improving well-being. Grant (2001b) as part of his thesis researched three approaches for a framework of coaching: cognitive, behavioural and combined cognitive and behavioural coaching and their impact on trainee accountants' average grade, study skills, mental health, self-regulation, self-consciousness and self-concept. It was concluded that SF-CB coaching appeared to be an effective approach to goal attainment and personal development and *"may prove to be a useful platform for a positive psychology and the investigation of psychological mechanisms involved in purposeful change in normal adult populations"* (Grant, 2001b, p. 12).

Grant and Greene (2001) claim that the cognitive behavioural approach recognises four domains of human experience: thoughts, behaviour, feelings and the environment. Goal attainment is said to be best fostered by recognising the reciprocity of these four domains and structuring them to best support goal attainment. Furthermore, in order to overcome psychopathology alienation, the Coach Yourself program include aspects of brief solution-focused therapy. *"Solution-focused therapy is a constructivist, humanistic approach that concentrates on the strengths that clients bring to therapy, and emphasizes the importance of solution construction rather than problem analysis"* (Grant, 2003, p. 255). So, according to this approach, recognising the clients **thoughts, behaviour, feelings** and **environment, focusing on strengths** and **focusing**

on constructing a solution are key elements. This fits with a study by Govindji and Linley (2007) emphasising the use of **signature strengths** to be associated with both subjective and psychological well-being and Burke and Linley, (2007) whose research showed that self-concordant goals are better achieved and more readily pursued when involving coaching, and that in agreement with the Self-Concordance Model (Sheldon and Elliot, 1999), their attainment can lead to increases in well-being enabled by satisfying our needs for **autonomy, competence and relatedness** (Burke and Linley, 2007). In a more recent study, Linley et al. (2010) aimed to understand how using strengths leads to well-being outcomes and whether or not using signature strengths helps us to achieve our goals, and that this in turn leads to greater well-being. They researched 240 college students who completed measures of psychological strengths, need satisfaction, well-being, goal progress and goal attainment over 3 months. They used a repeated-measures, cross-sectional model in which signature strengths is associated with goal progress and in turn, the fulfilment of psychological needs and well-being. Results showed that strengths use is associated with better goal progress, which in turn is associated with psychological need fulfilment and enhanced well-being at both six and ten week assessments. *“That is, to the extent that individuals make progress toward personally relevant goals and to the extent that this goal progress feels concordant with self-growth and autonomy, people will predictably feel more positive affect, less negative affect, and greater life satisfaction”* (Linley et al., 2010, p. 13). This supports earlier research (e.g. Sheldon and Kasser, 1998; Sheldon and Elliot, 1999) showing that self-concordant goals, i.e. personally valued and associated with autonomy, connectedness and growth, are specifically associated with greater well-being.

Although the results show in favour of improving well-being, there are some limitations to the study. Firstly, as a sample, college students tend to be non-diverse (e.g. age and marital status) and so caution must be exercised in generalising the results to other groups, especially where culture may have an impact on well-being goals (Oishi, 2000). The study design doesn't allow for pure longitudinal effects and the use of composite scores means that certainty cannot be applied to all strengths equally. As seen for example with Burke and Linley (2007), coaching is often linked with goal progress, so this study is interesting in its development of the use of self-concordant goals, at the same time, it is specific and cannot be generalised to all goal progress within a coaching framework. However, as discussed in section 2.16, research suggests a strong correlation between **goal attainment and life satisfaction** (e.g. Diener, 1984), and further evidence (e.g. Grant et al., 2010) continues to demonstrate this, therefore, it is fairly safe to say that goal attainment is an important aspect of coaching **where the goals feel concordant with self-growth and autonomy**.

Green, Grant and Rynsaardt (2007) trained teachers in techniques and theories of coaching psychology who then undertook 1-2-1 life coaching with senior high school students. Results demonstrated that coaching can enhance psychological and subjective well-being of senior high school students, as well as building cognitive hardiness, mental health and hope. The structure of the coaching involved a discussion of what was going on in the coachee's life with the aim to raise awareness of their current situations, and then identify the issues and personal resources to move them towards their goal. This may be an important part of the change process: **Identify the issues; raise awareness; identify**

personal resources; take action towards a goal. This takes into account systematically working through the self-regulation cycle of: setting goals, developing action plans, monitoring and evaluating progress and is a process that several studies have also adopted (Green, Oades and Grant, 2006; Gyllensten and Palmer, 2006).

Dulagil, Green and Ahern (2016) examined the impact of a group coaching programme as part of an overall positive education programme (built on the initial study by Green et al. (2007) by adding goal commitment and attainment to the measures to explore the progress and achievement of participants). Whilst the teachers were trained in coaching psychology as part of the programme, it was the students themselves who (co)-coached each other following the training in coaching skills. This (2016) study demonstrated much more favourable results for depression, anxiety and stress with significant improvements across all measures, further to this, there were also significant improvements in well-being, total trait hope, and cognitive hardiness. Participants also showed a significant increase in perceptions of successful striving towards personal goals. Personal and academic goal commitment, and academic goal striving did not result in significant increases but were reported as demonstrating a “trend towards increased success” (p.131).

With both these studies, the sample may not be representative of the general population, as with previous studies, the sample may have been particularly motivated, being self-selected and with a small intervention size of 25 students in the second study and 56 in the first study. Although the (2007) study did not

specifically measure health and well-being, as carried out in the 2016 study, they do make claims that this approach may impact positively on students' overall health and well-being and this was realised in the 2016 study. However, both of these studies are interesting by the inclusion of coaching/psychology training in order to deliver the coaching sessions and by the inclusion of educational elements to the research. Unfortunately, the researchers were unable to include a control group within their research, neither did they include the difference between those who took part in the coaching or wider positive education programme exclusively, therefore the causality of the results is unclear between these two determinants and would benefit further research. However, the benefit of a coaching programme within wider positive education demonstrates a promising inclusion for well-being outcomes.

Mindfulness was also included within the positive education programme of Green et al. (2016) based on the research by Spence et al. (2008) that mindfulness practice could enhance coaching outcomes. To test this, 45 adults took part in mindfulness-based health coaching over eight weeks. As per other studies, a randomised controlled study was utilised and participants were assigned to either a solution focused cognitive behavioural coaching followed by mindfulness training, mindfulness training followed by solution focused cognitive behavioural coaching, or health education only control group.

Goal attainment was significantly greater in the facilitative/coaching format than the educative/directive format. However, no significant differences were found for goal attainment between the two mindfulness training/cognitive behavioural

solution focused conditions suggesting that the delivery sequence had little bearing on the outcomes and the outcome of the impact of mindfulness training itself was mixed. They noted an important finding related to the observation that facilitation and support offered greater health behaviour change and that health professionals have a better chance of being effective if they act as facilitator rather than expert – guide rather than direct and ask rather than tell. This aligns with coaching in that it acts as a supportive mechanism rather than educative and further evidence by Taylor (1997) that coaching was shown to reduce stress more than training.

Banks (1998, 2001, 2005, 2006, 2010) made popular an approach that has been utilised in coaching and focused on the relationship between thoughts, mind and consciousness. Utilising this approach, Sedgeman and Sarwari (2006) carried out a pilot programme with eight HIV positive patients in the Positive Health Clinic at West Virginia University School of Medicine who attended a 1.5hr seminar into health realisation/innate health. Brief Symptom Inventory (BSI) was measured by a Clinic Staff Member before, following the intervention and 4 weeks following the seminar as a follow up. Each case was evaluated individually and conclusions were made grouped according to those who tested as “psychiatric inpatients”, “Psychiatric outpatient” and non-patient normal range. Those in the “psychiatric inpatient” range of the BSI (1 person) showed no changes as a result of the seminar, however, both of the other ranges showed improvements.

Further to this study, Kelley (2011) tested this approach further with 54 adult prisoners on probation who completed between 8-20, 2hr weekly group sessions

of principle-based correctional counselling (an alternative term for Innate Health/Health Realisation). Thought Recognition was measured by both, self-rating of an understanding of how the principles of mind, consciousness and thought work together to create their experience (on a four-point likert scale) and secondly, by responding to three items based on principle based correctional counselling's definition of thought recognition. Well-being was measured using the Well-being Inventory (Kelley, 2004), this measured three dimensions of psychological well-being and two dimensions reflecting the absence of well-being, but didn't look at subjective well-being.

Significant positive relationships were found between both measures of thought recognition and psychological well-being and in the follow up recordings. This supports the prediction that participants' thinking will increase as their level of thought recognition increase and that this would result in higher psychological well-being and more functional behaviour.

"Pransky (1997) offers three possible explanations for these findings, namely, that greater thought recognition may lead to: (1) a heightened sense of control, as people have more control over their thinking than over their external environment; (2) a heightened level of understanding life experiences that previously may have been confusing or frightening; and (3) an increase capacity to view things in a balanced fashion, leading to a more philosophical outlook on life" (Kelley 2011, p. 144).

Kelley (2011) also drew parallels to mindfulness and how in addition to the study by Spence et al. (2008), mindfulness has been related to numerous indicators of psychological health including higher autonomy and well-being (Carlson and Brown, 2005). Heppner et al. (2008) suggest that when people are mindful, they have a less judgemental and defensive experience of the present moment,

specifically that *“positive and negative thoughts are allowed to “stream by” unfettered, without being imbued with heightened self-relevant implications. Likewise, positive and negative events and experiences are taken at face value and they are not “attached to the self”* (Heppner et al., 2008, p. 487).

The philosophy underpinning this approach is under-researched, but initial findings demonstrate potential in the area of improving well-being, and psychological well-being in particular. However, there are some interesting parallels that can be drawn from the process that are relevant to both coaching and well-being. Firstly, this approach is one that proposes a reversed understanding of where stress comes from: that it is from inside us rather than outside of our control. In that sense, it is our thoughts about our situation that result in the behaviour and feelings that are subsequently exhibited. This is very similar to the cognitive behavioural approach already mentioned that focuses on the relationship between thoughts, behaviour and emotions. Relating this to coaching, the role of the coach is to support the coachee to recognise where their experience is being generated and to find ways to gain a new understanding of that situation. In that sense it can be very powerful as experiences that were previously out of the coachee's control and couldn't be change e.g. the stress at work, are now within their control in terms of how they interpret them.

As new research, the findings need to be interpreted cautiously as it carries inherent limitations; the studies lack a true experimental design and as is similar with other non-principles-based studies, the number of counselling sessions varies. Thought recognition involved insightful, rather than intellectual

understanding and therefore the results are based around the participants' understanding and measurements according to this which may be challenged under scrutiny. Although this approach is not referred to as coaching, it can be applied in the field of coaching where working with non-clinical clients, in that sense, it gives another insight into what it is about this approach that creates results and this will be explored more in the next section.

In order to fully consider the question of what factors associated with coaching and its processes assist changes in well-being, the **structure of coaching** needs also to be considered in terms of the moderators of coaching. Coaching by a **professional coach** as opposed to peer-coaching or training has been seen to be more effective (e.g. Spence and Grant, 2005, 2007). Spence and Grant measured goal striving, psychological well-being and subjective well-being. 63 Adults took part in a solution-focused cognitive-behavioural life coaching programme including assignment as part of a randomised controlled study to a professional coaching group, peer coaching, or waitlist control. They set out to investigate whether professional life coaching was more effective than peer coaching in enhancing the goal progression and goal commitment of coaches, and whether life coaching enhanced the subjective and psychological well-being of individuals.

Professional coaching was shown to be more effective than peer coaching in increasing goal commitment, goal attainment and environmental mastery. Peer coaching was linked to significant decreases in goal commitment and it is argued that maybe the experience was diluted by the peer coaching, and in addition,

there was little sense of common purpose, so perhaps they did not hold a uniformity of goals. However, Jones, Woods and Guillaume (2016) carried out a meta-analysis in order to synthesise the effectiveness of workplace coaching and found that internal coaching was more effective than external coaching and when multi-source feedback was excluded. Further to this, they also found that there was no difference on the format of coaching (face-to-face or blended learning) or the duration of coaching (number of sessions or longevity). They did however, find that coaching had a positive effect on workplace outcomes.

It should be noted that many of the coaching studies don't actually comment whether the structure had an impact on the outcome and often there were moderators and mediators in existence (e.g. a variable number of coaching sessions) with no discussion of the impact of these. Some of the studies offered a coaching protocol and restrictions around the qualifications of the Coach, however, the impact of the structure of the coaching is still relatively undiscovered within research.

In looking at the research that begins to answer the question "what factors associated with coaching and its processes assist changes in well-being?" it can be seen that other than the evidence suggesting that a CB-SF format of coaching is effective in enhancing well-being, there is little other strong evidence specifically designed to support this question. However, if the existing evidence is pulled apart, it presents some interesting concepts:

1. coaching which involves thoughts, behaviour, feelings and the environment (i.e. cognitive behavioural), solution and strengths focused has been shown to be

important within coaching to improve well-being (e.g. Cognitive Behavioural Solution Focused coaching);

2. Coaching assists in working towards goals that feel concordant with self-growth and autonomy (Self-Concordance Model, Sheldon and Elliot, 1999) which leads to enhanced well-being by satisfying our needs for autonomy, competence and relatedness (i.e. Ryan and Deci, 2001, Self Determination theory; Sheldon and Kasser, 1998; Sheldon and Elliot, 1999);
3. Coaching models demonstrate effectiveness when combining the following aspects: Identify the issues; raise awareness; identify personal resources; take action towards a goal using the self-regulation cycle of: setting goals, developing action plans, monitoring and evaluating progress (e.g. Green, Oades and Grant, 2006);
4. Coaching as part of wider educational programmes have potential to offer benefits to well-being when structured to offer facilitation and support;
5. Greater thought recognition leads to improved psychological well-being and this may be due to an increased capacity to be aware of how our reality is created (awareness) (Kelley, 2011);
6. Professional coaching may yield better results in well-being in relation to goal commitment, goal attainment and environmental mastery (Spence and Grant, 2005, 2007), however, internal coaching may be more effective overall, the impact of professional versus internal coaching on the impact on well-being more generally remains to be concluded.

These six points together begin to build a picture of how coaching may contribute to changes in well-being, however, perhaps in order to fully understand what

factors associated with coaching and its processes assist changes in well-being, it is necessary to understand *how* those changes take place? The Transtheoretical Model (TTM) of Change (Prochaska and DiClemente, 1984) has become popular in supporting health-related behaviour change and yielded positive results particularly in the clinical area (i.e. obesity: e.g. Chupurdia, 1993); and smoking: (Prochaska and DiClemente, 1983; DiClemente et al., 1991). Grant (2001b) suggests that the TTM has many strengths and has used it to inform his coaching research, for example he suggests that it can be used to: highlight the processes involved in adopting healthier behaviour; detail the socio-cognitive factors with which purposeful behaviour change is associated; and to specify strategies to be effective at each of the different stages of change.

While this model has been used to support health-related behaviour change, movement through the stages is based upon social cognitive and learning theory models of behaviour change, it therefore offers a framework that is useful in making sense of change-related behaviour. The model suggests that there are five stages of change: precontemplation (individual demonstrates no intention to change); contemplation (individuals are aware and thinking about changes that they may make); preparation (individuals prepare for and commit to changes); action (individuals make major behavioural changes); Maintenance (changes are maintained over a period of time – around six months). Along with the five stages of change, there are ten processes of change. Theeboom, Van Vianen and Beersma (2017) created a temporal map of coaching by linking the coaching process to seminar concepts in psychology and described the competencies that are crucial for coachees to bring about the different stages of change. In Table

2, the stages of change and associated processes as states by Prochaska and Velicer (1997) is related to the main goals and focal competencies of the coaching process as stated by Theeboom, Van Vianen and Beersma (2017).

Stage of change	Process	Main coaching goal	Focal competencies
Pre-contemplation	Consciousness raising; Dramatic relief; Environmental re-evaluation	Development of awareness	mindfulness
Contemplation	Self-re-evaluation	Exploring the wilderness and perceived ability to change	Environmental receptiveness; Intrinsic goal orientation
Preparation	Self-liberation	Planning for change	Self-efficacy; Goal setting; Implementation intentions
Action	Contingency management; helping relationship; Counter-conditioning; Stimulus control	coachee acts without coach	
Maintenance/ termination		Integration of learning	Reflection

Table 2: Stages and Processes of change - adapted from Theeboom et al. (2017) and Prochaska and Velicer (1997)

The research findings presented above relate the coaching process to its impact on well-being and also compared to the theoretical contribution of behaviour change. These findings present interesting contributions to knowledge about (a) how change takes place and (b) how coaching can be utilised to harness this change. In further aiming to understand this aspect, the final question is considered below.

2.18.3 What change takes place when a person experiences coaching?

This question is much more difficult to answer and far less researched than the first two questions covered above because in many ways what changes in a person is reflected in the measurements that are adopted (the outcome). So, for example Green, Oades and Grant (2006) measured goal striving, well-being and hope. Well-being was measured according to the Satisfaction with Life Scale and Scales of Psychological Well-being. The latter measure has six sub-scales (autonomy, environmental mastery, positive relationships with others, purpose in life, personal growth and self-acceptance (Ryff, 1989). The results demonstrated an increase in subjective well-being and significant increases on all six scales of psychological well-being. Therefore, it could be said that the change that took place was an increase in; autonomy, mastery, relationships, purpose, personal growth and self-acceptance, which is of course, according to this research, true. However, what does this mean and what about changes that aren't measured? What changes takes place that result in an improvement in well-being (the process of change)?

In order to start to answer this question, it is worth separating the results of well-being measures with additional changes that take place within the coaching and relate this to relevant theories. For example, the current study was based upon Hope theory (Snyder, Michael and Cheavens, 1999) and this is useful in explaining enhanced well-being: Snyder, Rand and Sigmon (2002) state that positive emotions and well-being are the result of unimpeded pursuit of one's desired goals. In the current study, the life coaching programme included

solution-focused techniques to help participants determine possible routes to their goal, increasing pathways thinking and agentic thoughts (through self-talk). Hope theory suggests that hope is stimulated through articulation of the goal (Snyder, Michael and Cheavens, 1999). There are therefore, two components to consider that may contribute towards a change process: **goal progress** (which may contribute towards change) and **hope**, (which may be the change in itself). In the current study, it is suggested that coaching enhances hope and maybe in turn hope enhances well-being? This links with Huppert and So (2011) measurements of well-being which include “optimism” and for instance, Ryan and Deci (2001) theory that goal setting is a central construct for developing and sustaining health-related behaviours.

Green, Grant and Rynsaardt (2007) also identified that hope increased for participants who completed the life coaching intervention. Furthermore, they suggested that the life coaching programme appeared to be effective at enhancing hardiness. Cognitive Hardiness is suggested by Bonanno (2004) to be an important dimension of resilience, comprising: **commitment to life goals, sense of control or belief that they can control life events, and a perception that change is a challenge** (Kobasa and Maddi, 1977). Therefore, it could be suggested that **coaching may change the coachees resilience through a commitment to goals, sense of control and attitude towards change whilst also giving hope that they can move positively towards their goals**. Furthermore, hope has been shown to positively correlate with: self-esteem, perception of control, optimism, perceived problem-solving capabilities, positive affectivity, and positive outcome expectancies (Snyder et al., 1991).

Primarily, the aim of the coaching in the above study was to **raise the coachee's personal awareness of their current situation**. Whilst this is part of the process covered in the above question, and one that tends to follow on to identifying personal resources and moving towards their goal through the self-regulation cycle, it is also a behaviour that could be said to be susceptible to change and is therefore being suggested here that personal awareness is a key consideration that changes during a coaching intervention. Gyllensten and Palmer (2005a, 2005b, 2006) as previously discussed, suggest that working through the self-regulation cycle towards their goals, enables coachees to improve self-confidence and resilience perhaps because they overcome barriers and challenges.

Grant (2003) used the SRIS (Self-reflection and Insight Scale) alongside well-being measures, which is unusual, however, it is worth considering whether **increased "insight"** is an important part of the change process? Lyke (2009) examined the relationship between the SRIS and well-being and found that participants reported greater subjective well-being when their insight levels were high, following on from this Harrington and Loffredo (2011) confirmed that the disposition to have a conscious awareness of one's thoughts, motivations and feelings is important to overall well-being. However, further to this, there doesn't appear to be any research demonstrating whether there is a link between self-awareness and well-being.

Coaching in some ways is a form of self-care (or a recognised step towards making positive changes) and previous research has found self-care an important

predictor of well-being (e.g. Coster and Schwebel, 1997) and yet this is not reflected in the measures of well-being. It would be reckless to imagine that a coachee would become more aware of problem situations, raise their insight about what to do and then not follow this action through, however, models of behaviour change demonstrate that motivation to change is impacted by several different factors. The importance of recognition and action for self-care may be key in sustaining personal well-being. Further guidance on this question can be sought by reflecting back on the theories of well-being discussed earlier in this chapter. For instance, the Broaden and Build Theory of Positive Emotions (Fredrickson, 1998, 2001, 2004) suggests that as we broaden our thoughts and build actions around positive emotions, this results in problem-solving approaches and creative and flexible thinking, this in turn builds our resources to deal with future challenge and we become more resilient.

The humanistic theory of Rogers (1951, 1959, 1961) assumed that people have a tendency to become fully functioning and this meant being self-directed, autonomous and open to experience. Following this theory, what changes as a result of the coaching, may be that coachees identify ways to become fully functioning and this is underpinned by positive emotions and identification of resources that will support the change process. What hasn't been discussed here but may be of importance, is whether the Coach themselves are part of those resources and social environment that facilitates that change?

The question "what changes as a result of the coaching" is the most difficult question to answer based upon empirical research and taking into account recent

literature and demonstrates a need for further research in this area as more questions are raised than answered. However, what has been discussed above shows that changes do take place when a person experiences coaching and some but not all of these are measured and recorded as the output from coaching. Figure 14 outlines a summary of the literature discussed in this section; there is a demonstration of the input from the coaching, the change process and the resulting output as well as the associated measures that have been adopted. While none of the studies utilise all of these components, it is helpful to reflect on what has been discussed in light of the three conceptual areas to which the research has been assigned. By splitting the research into these aspects, it becomes clearer to demonstrate the full process from coaching to increased well-being and an insight into the change that may be taking place to result in that outcome.

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

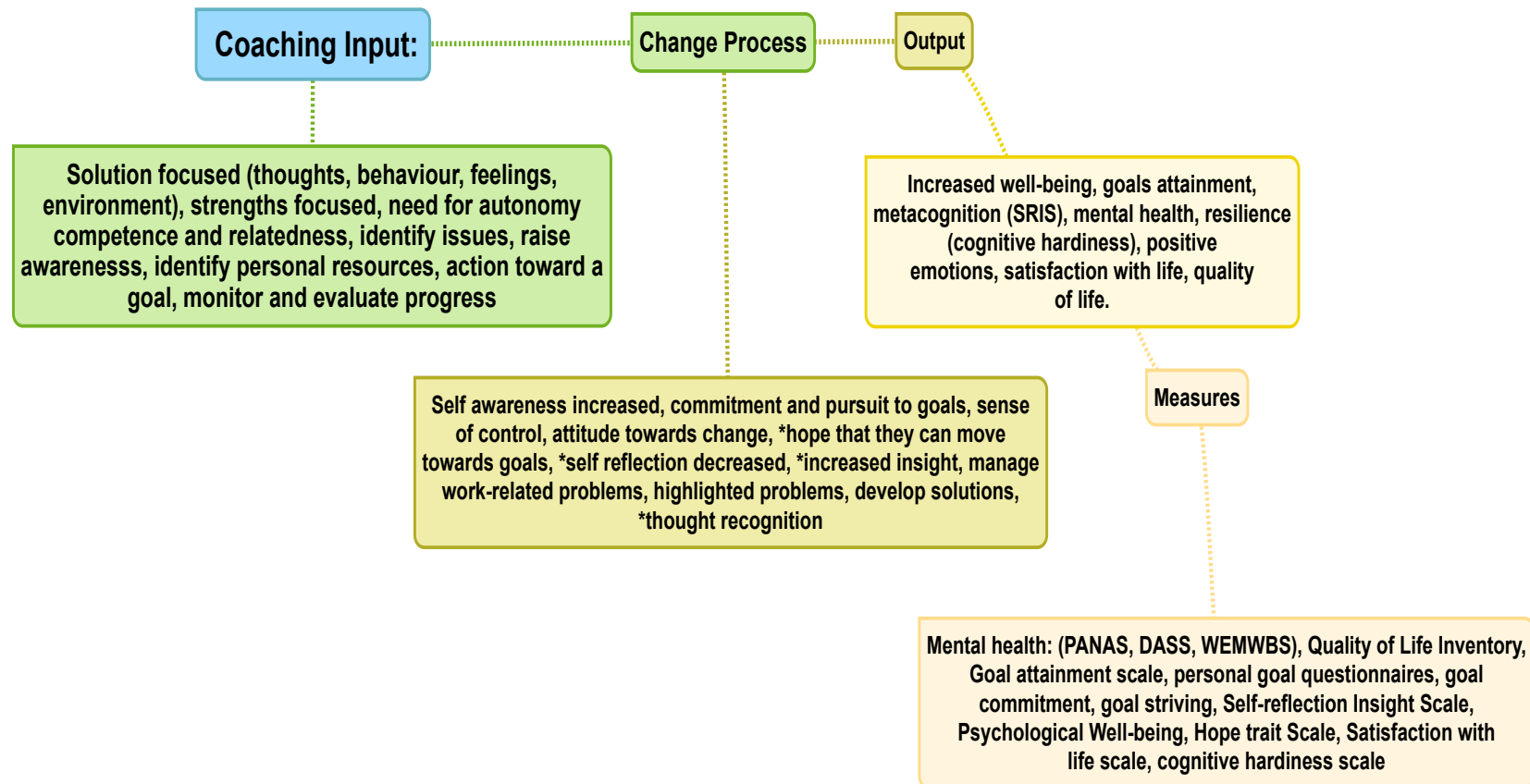


Figure 14: Changes associated with coaching

*2

² * highlights that this aspect also has a direct measure attached to it.

2.18.4 How has the coaching and well-being literature developed to-date?

The review of the literature throughout this chapter has focused on the most relevant articles and sources which build a picture of the efficacy of workplace coaching on mental well-being. However, on a review of the literature utilised throughout this chapter³, it can be seen that the well-being literature spans between 1958 and 2018 and the coaching literature spans between 1992 and 2018. While the nature of a literature review is subjective and based on the authors search requirements, it becomes apparent that within the literature utilised for this chapter, there was a flurry of publications on well-being between 2001 and 2011 (60% of the overall well-being citations), and similarly of coaching publications between 2005 and 2009 (50% of the overall coaching citations) and this naturally ties in with the increased interest in well-being. Indeed, Grant (2013) reviewed the literature into the efficacy of coaching and found 234 outcome studies published between 2000 and 2011 (1/3rd of the total published papers since 1937). However, in spite of the popularity of coaching publications, Grant (2013), suggested that the major issue within these studies, as a foundation for knowledge about coaching efficacy and establishing an evidence-based, is *“the fact that there is little consistency in the use of outcome measures in coaching research”* (p.27). While this has meant that outcomes such as those associated with well-being, are an interesting and important development within the evidence-base, and *“that coaching can be a very effective human change*

³ Each of the references throughout the chapter were divided according to: well-being; coaching; theory; non-coaching interventions; and measures. The figures provided focus solely on the first two categories which account for 174/224 (77%) of the overall references within the chapter.

methodology” (Grant, 2013, p.33), the lack of sophistication within the research-base does need to be acknowledged.

While there are still ongoing issues with the coaching research such as a lack of randomised controlled-trials, and inconsistency as mentioned above, the coaching literature has been developed somewhat since 2012 through several meta analytic studies and systematic reviews (e.g. Theeboom, Beersma and van Vienen, 2014; Lai and McDowall, 2014; Jones, Woods and Guillaume, 2016; Sonesh et al., 2015; Grover and Furnham, 2016; Athanasopoulou and Dopson, 2018; Bozer and Jones, 2018; Van Zyl, Roll, Stander and Richter, 2020). The following sections will review some of the more recent systematic reviews and meta analyses, relating to their contribution to the coaching evidence-base.

Systematic Reviews

Lai and McDowall (2014) carried out a systematic review and focused rather precisely on the attributes of effective coaching psychologists, they confirmed that the coaching relationship is a key focus, the importance of the professional psychological training/background was emphasised in order to manage a coachee’s emotions and that “coaches’ attributes have a significant influence on the effectiveness of coaching process and results” (p.2).

Grover and Furnham’s (2016) systematic review focused on the efficacy of coaching and its underlying mechanisms. Similar to the research to be undertaken for this thesis, although with a much broader focus, Grover and

Furnham (2016), demonstrated that coaching is an effective tool within organisations and that this effectiveness is impacted by a number of facets.

Athanasopoulou and Dopson (2018) conducted an extensive systematic review of executive coaching peer-reviewed outcome studies. This article considered not only how these studies were designed and researched but also provided a comprehensive review of executive coaching outcomes, contextual drivers and gaps in understanding of coaching practice.

Bozer and Jones (2018) developed an interesting review that synthesises empirical studies into seven determinants of coaching effectiveness. They suggest that self-efficacy, coaching motivation, goal orientation, trust, interpersonal attraction, feedback intervention, and supervisory support determine workplace coaching effectiveness. This provides an important contribution on which to build further coaching studies which assess each of these areas in detail.

Van Zyl, Roll, Stander and Richter (2020) took the literature in a different direction, this systematic review focuses on positive psychological coaching definitions and models. It proposes a definition, not vastly different from those discussed in this literature review here, however, understandably, with a more distinct focus on positive rather than negative affect.

The above systematic reviews address specific questions within the coaching literature, critically appraise the studies and contribute towards what we know about the efficacy, attributes, outcomes and underlying mechanisms of coaching. By contrast, the meta-analysis studies are able to consider more specific types of study and the nature of those findings.

Meta-analytic studies

Theeboom, Beersma and van Vienen (2014) suggest that there was a strong need for the existing quantitative coaching research to comprehensively review and answer the question: Does coaching work? This was undertaken specifically within an organisational context and focusing on the effect of coaching on individual level outcomes. Their findings demonstrated overall effectiveness in organisations and similarly as discussed within this literature review, well-being was one of those outcomes seen to be achieved.

Sonesh et al. (2015) focusing also within the area of coaching outcomes, investigate coach-coachee relationship outcomes and coachee goal attainment outcomes. They suggest that there are stronger effects of coaching on eliciting relationship outcomes with the coachee than for outcomes relating to goal-attainment. Interestingly, within goal-attainment outcomes, they note that coaching has a stronger effect on behaviour rather than attitudinal changes. They also explored moderators of coaching and found study design, sample type, coach background, and number of coaching sessions were significant moderators.

Jones, Woods and Guillaume (2016) provide the most recent (meta-analysis) study synthesising existing research on the effectiveness of workplace coaching. A framework of potential coaching outcomes is presented which demonstrates a positive effect overall on organisational outcomes. Practice moderators were examined and indicated that internal coaches had a significant moderation of effect size, while coaching format and duration of coaching found no moderation of effect size. The findings on these coaching moderators are different to Sonesh et al (2015) as discussed above, although the focus on relational and goal-attainment outcomes may account for the difference in these findings.

In addition to the systematic reviews and meta-analysis studies, there have of course, been a substantial number of individual coaching studies over the past 10 years, the following with a focus on well-being (Grant et al, 2010; Spence and Oades, 2011; O'Connor and Cavanagh, 2013; Green et al 2014; Grant, 2014; Dulagil et al 2016; Jones et al 2016; Dias, Palmer and Nardi, 2017, Grant and O'Connor, 2018, de Haan et al, 2019; Selwyn and Grant, 2019; Atad and Grant, 2020). However, since 2009, there does appear to have been a slow-up of the coaching publications related to well-being. While this doesn't negate the highlighted importance of facilitating improved health and well-being, one should question why this is? Perhaps by considering the most recent coaching publications, this question can be answered? Relevant to this topic of study, three articles are considered for their relevance and recent publication.

De haan et al (2019) recognising the popularity of executive coaching, reports on the development of a model for coaching effectiveness. They demonstrate

coaching effectiveness in an organisational setting and found evidence for the importance of the working alliance and finally that the risks of a leader derailing in large organisations may be mitigated by coaching.

Selwyn and Grant (2019) adopt an exploratory study focusing specifically on the links between self-insight, self-regulation and solution-focused thinking. They conclude that the relationship is more complex than previously shown and that in relation to well-being and goal attainment, time should be spent building self-insight rather than focusing solely on self-control or self-reflection.

Atad and Grant (2020) in a similar direction to the focus for this thesis, recognise a lack of research about the effects of coaching on the trainee coaches and the change process they go through while learning coach skills and theory. They conclude that there are a range of personal changes and development induced through the coach training.

Therefore, a critique of the coaching and well-being literature over the past ten years provides some interesting points for discussion in terms of what is now known about coaching efficacy. Passmore and Fillery-Travis (2011) suggest that there are three phases of knowledge evolution:

Stage 1: Exploration and definition

Stage 2: Theory, methods and measures

Stage 3: Exceptions and variance to theories

Furthermore, they suggest that within the above stages is a maturing in the methodologies and instruments e.g. shifting from case studies through to meta-analysis. They go on to suggest that as of 2011, we were emerging from the “exploration and definition phase” and moving into “*the point where theory development and testing comes to the fore*” (p.9). So, has the coaching literature evolved any further in the past 10 years? While we continue to re-explore and re-define coaching and its various iterations, the meta-analytic and systematic reviews provide convincing evidence that we are certainly established within stage 2 and the literature discussed thus far demonstrating the impact of coaching on mental well-being is testament to this (e.g. Grover and Furnham, 2016; Theeboom et al, 2014). It could also be argued that we are dipping our toe into stage three - for whom does coaching work most effectively? (e.g. Atad & Grant, 2020). Alongside this, we have seen far more sophisticated methodologies such as randomised controlled trials, interpretative phenomenological analysis, and critical realism. However, does this level of maturity apply to the coaching and well-being literature? Arguably, the coaching and well-being literature has been developed because the maturity of the coaching literature overall has moved to explore outcomes-related theories. Furthermore, included within the systematic review and meta-analysis is an overview of the underlying mechanisms of coaching efficacy. What we don't know is whether these underlying mechanisms are relevant also to well-being outcomes (Stage 3). Therefore, it could be argued that within the future of coaching research, more sophisticated research methodologies need to be adopted which are consistent and explore the full range of coaching outcomes in order to determine methods and measures to establish theory and added to this,

that exceptions and variances to those models are explored along with ultimately, meta-analysis on the full spectrum of well-being outcomes.

2.19 Conclusion

The review of the literature discussed above has presented evidence considering the current debate around well-being stemming from the literature into positive functioning through the factors impacting upon mental health and into the modern conception of mental well-being which encompasses both happiness and meaning. Mental well-being is defined as when an individual feels good and functions positively in an environment where they can flourish and achieve their full potential, vitality and sense of purpose at work and in society.

A key message is that mental well-being has major consequences for health, economic development, societal progress, thriving businesses and employee resilience and engagement, however literature and therefore public policy and subsequent workplace measures until recently have focused on avoidance, or treatment, of ill-health. It is suggested that it is worth building on the evidence base considering the independent drivers of both hedonic and eudaimonic well-being as opposed to focusing on the drivers of ill-health, and that within this field we have more control individually and within workplaces to contribute to positive well-being outcomes. Furthermore, that it is time the research moved from the definition of mental well-being into how employee well-being can be achieved, and this highlights some key considerations about the impact of workplace interventions on mental well-being, such as coaching.

This review of the literature has also suggested that the positive psychology theoretical framework provides foundations to position further research which can build on the factors that contribute to employee flourishing. However, alongside this evidence base are alternative theoretical perspectives such as learning and change theories which, when considered with the positive psychology theories, can inform research not only into what is employee flourishing and what contributes towards it, but also how can it be achieved; this is a key contribution for future research because it consider both aspects into a theory of how to change well-being.

This chapter has furthermore considered well-being measures; naturally, if research points towards changes to well-being, this needs to be measured. Several well-being measures have been considered and it is suggested in line with previous research that those which include both subjective and psychological components provide the most realistic representation of mental well-being.

Section five has considered interventions shown to impact upon mental well-being, however, while the “Five Ways to Well-being” heavily dominate this field and provide evidence about factors supporting well-being, it is suggested that developing an understanding of the causal mechanisms that lead to sustainable adoption of these five measures would contribute to the evidence base and alongside this, it is suggested that coaching may provide the toolkit to further enhance adoption of actions that improve mental well-being.

Coaching is defined as a collaborative process by which the coach facilitates self-awareness, responsibility and well-being, which contribute towards goal attainment and flourishing of the client. This chapter recognises that there are many varying types of coaching but that the main components for well-being outcomes appear to be: constructing a solution; attaining goals; utilisation of signature strengths; recognising our thoughts; social support, autonomy and self-acceptance. A CB-SF approach to coaching has dominated the research which suggests that coaching does improve well-being however, that the question now needs to move to “how does it work?”

While there is growing evidence about the efficacy of coaching in general, key literature has been presented to provide a summary of the well-being-specific research relating to three conceptual areas: Does coaching change mental well-being? What factors associated with coaching and its processes assist changes in well-being? And, what changes take place when a person experiences coaching? While much of the research confirms that coaching does improve well-being, the naivety of the research suggests that this cannot be taken for granted, for example a lot of the research utilised a cognitive-behavioural-solution-focused approach to coaching and therefore further research may utilise differing types of coaching to continue to explore well-being outcomes. Added to this, the existence of moderators and mediators within the coaching research may to a greater or lesser extent have impacted on the outcome, therefore while many researchers will advocate the efficacy of coaching, this same certainty cannot be applied to well-being and even less with regard to the impact on well-being in the workplace, for which there is minimal research. The research from the literature therefore suggests that certainty of the impact of coaching on mental well-being

cannot be assumed and further research should undertaken to continue to add to the coaching evidence-base.

Furthermore, the questions “why and how” have not been fully explored especially with regard to the process of coaching. For example, evidence points to the success of the cognitive behavioural solution focused coaching. However, as suggested by de Haan, Culpin and Curd (2009, p. 40), there is also opportunity to consider the “general factors common to all good coaching” which have been shown to have a greater impact on the perceived effectiveness of coaching than the technique or approach. Building on this idea, there are suggestions that key to change during a coaching intervention is personal awareness of the situation and resources to manage it and that coaching has more favourable outcomes when it assists in working towards self-concordant goals, follows a cycle of self-regulation and harnesses greater thought-recognition. Research would benefit from addressing each of these points in order to discover whether there is a specific process of coaching that mediates well-being outcomes or indeed, whether it is simply an accumulation of general factors that determine efficacy.

While the mediators of coaching were the focus for this chapter, the moderators of coaching were also briefly discussed in terms of factors associated with the coaching process. There is conflicting evidence about the impact of internal versus external coaching although it was noted that the format of coaching did not moderate the outcomes. Future research, while not necessarily testing these moderators, should take these factors into account when assessing the validity of the results.

The key literature has also borrowed from outside of the coaching research in terms of the behaviour change that takes place and it was suggested that theories underpinning behaviour change could be used to inform coaching research. This provides insight into the process of coaching in order to bring about different stages of change. As suggested by Theeboom et al. (2017), the coaching evidence base could benefit from greater consideration of the change literature in order to understand and explore how coaching could contribute to well-being outcomes through behaviour change.

The question concerning what factors associated with coaching and its processes assist changes in well-being, is complex because it includes not only the model and techniques utilised within coaching, but also the general factors common to good coaching, and the theories that explain behaviour change in light of any recorded changes to well-being. Previous research specifically assessing coaching and mental well-being has not been clear on how or why coaching works and further research in this important area is required to provide direction to workplaces utilising coaching, to practitioners to guide their choice of coaching model and furthermore to contribute to the rigour of the coaching evidence-base.

Finally, this chapter has considered the (well-being) changes that take place when a person experiences coaching. Previously, the answer to this question has come through the use of well-being measures, however, an evaluation of the key literature suggests that there are several changes that take place when someone participates in coaching and it is these components that subsequently result in an improvement to mental wellbeing: self-awareness, commitment and pursuit to goals, sense of control, attitude towards change, hope, and increased

insight, supports employees in managing work related problems, developing solutions and recognising their thoughts all contribute to improved well-being. Whether these areas define or contribute to well-being outcomes is yet to be determined and certainly, this area of research is narrowly-focused and would benefit from a broader understanding – what are the areas that change when a person is coached and are these components of well-being?

Therefore, while the literature around well-being is substantial, there is a growing contribution of the field of coaching and the associated benefits to well-being, yet further research is needed to advance the literature and in particular, to consider the causal mechanisms of change taking into account the wider literature that may inform how change to well-being takes place and whether this can be harnessed through coaching. This presents a fascinating opportunity to advance the field of coaching for mental well-being, this focus is being set out in the research for this thesis and will be discussed in detail in the next section.

2.20 Research Questions

Based on the available and examined literature, there are some opportunities for further research and exploration. The following research questions have been identified to meet a gap in the literature and fulfil the aims and objectives of this research:

Overall Research Question:

Is workplace coaching an effective methodology for creating improvements in the mental well-being of employees?

Sub-questions:

- 1 Does participants' well-being change as a result of a workplace coaching intervention?
- 2 What changes to mental well-being occur as a result of workplace coaching?
- 3 What are the contributing processes and causal mechanisms of workplace coaching that underpin changes to mental well-being.

Chapter 3 Methodology

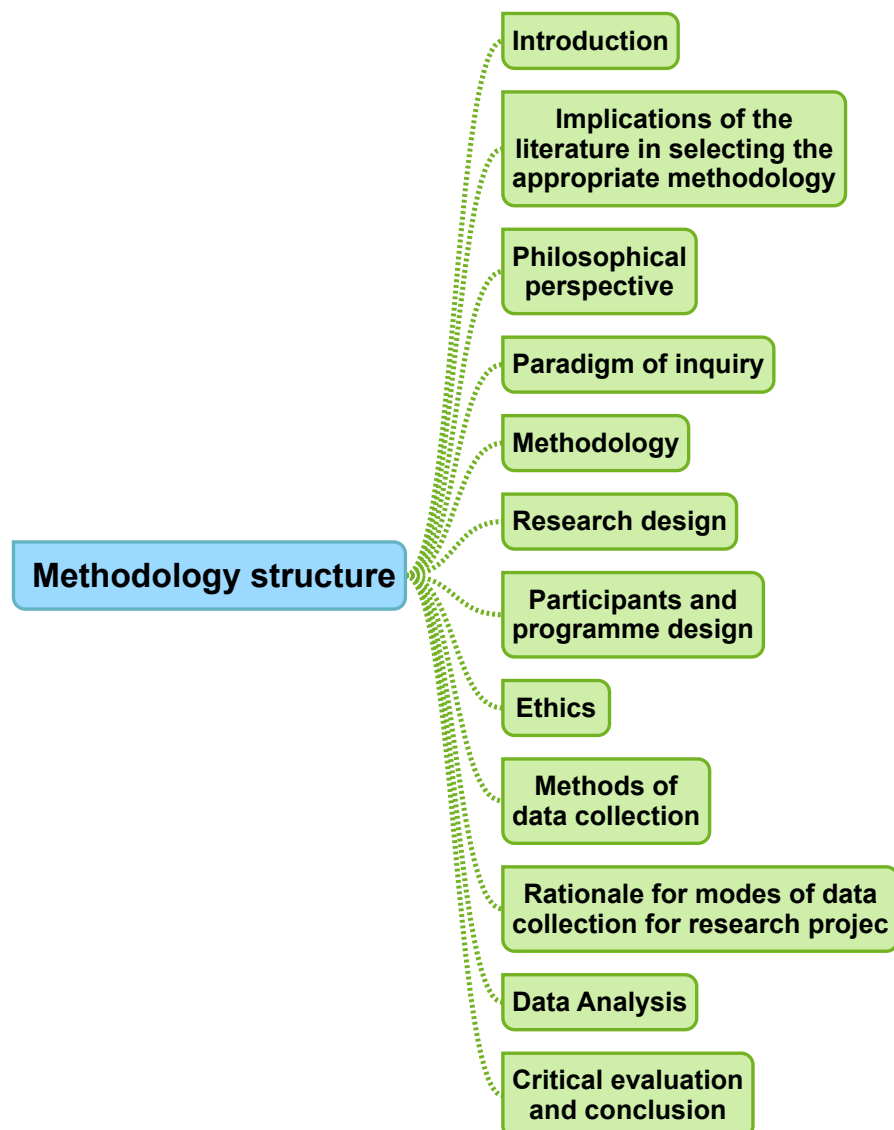


Figure 15: Mind map overview of the methodology chapter

*“If you don’t know where you are going, you’ll probably
end up somewhere else”.*

Lewis Carroll

3.0 Introduction

This chapter will seek to make explicit the philosophical assumptions underlying the research process underpinning the essence of what the researcher seeks to undertake. By seeking to understand the underlying ontological, epistemological and methodological assumptions which underpin the research, it will enable the researcher to opt for a robust strategy and method for data collection and analysis. The research will explore understanding and meanings around well-being, coaching and flourishing in the workplace. It will adopt a critical realism perspective and a mixed methods research strategy.

The literature review demonstrated that the coaching literature in particular is limited and the research presented here, builds upon the evidence base not only by exploring the relationship between coaching and well-being, but furthermore utilising a specific methodology. The research is underpinned by a critical realism philosophy which is novel for research concerning coaching. This approach will enable the researcher to gain an understanding of the participants’ account of changes to their well-being and reasons for this along with the opportunity to make inferences about reasons for what lies behind any observed changes and to make observations about what the reasons for this may be. This approach will be discussed in further depth throughout this chapter as it underpins the design of research that will be implemented.

The first part of the chapter deals with the philosophical perspective, it then identifies and analyses methodologies in relation to paradigms of inquiry, clarifies distinctions between different methodological approaches and rationale for which is most appropriate for the area of research. Finally, it will discuss the differences between methodology and methods and will evaluate the most appropriate modes of data collection.

3.1 Philosophical Perspective

For any research project, it is important to identify a philosophical perspective on which the research is built. Within the social science discipline, there are predominantly two philosophical perspectives that may be adopted to guide research, each are based on differing assumptions about the world and how science should be conducted (Kuhn, 1970): Positivism (incorporating Empiricism) stemming from an objective perspective of reality (e.g. Comte, 1848), and Phenomenology (incorporating rationalism), which stems from a subjective perspectives of reality (e.g. Hegel, 1977). The foundations of research in the field of mental well-being and positive mental health lies in the (positivist) scientific methods used to advance our understanding of mental disorders. Pioneering work by Maslow (1954, 1962); Jahoda (1958); Rogers (1961); Erikson (1963, 1982); Deci and Ryan (1985) among many others, have developed our understanding of flourishing, for instance by contributing towards our understanding of human needs, the content and criteria of mental health, growth and human potential, motivation and personality. They have also influenced the methodology of positive psychology (e.g. Kahneman, Diener, and Schwarz, (1999); Gardner, Csikszentmihalyi and Damon, (2001); Easterbrook, (2003)) and

coaching psychology literature (e.g. Grant, 2003; Grant, 2014; Green et al., 2006; Gyllensten and Palmer, 2005, 2006; Spence and Grant, 2005, 2007) which as discussed in the previous chapter, underpins the theoretical foundations of this thesis.

This research project is concerned with understanding the reality of participants' experiences of coaching and any subsequent impact on their well-being and is particularly interested in the underlying mechanisms that contribute towards change; this is an approach that fits between positivism and phenomenology, therefore both approaches will be discussed in this section along with the suggested philosophical position of critical realism as the proposed philosophy for this research project.

3.1.1 Positivism (Objective)

Auguste Comte (1788-1859) using the same principles as the natural sciences built the social sciences approach to research: *"through empirical observations immutable laws would illustrate that humanity was governed by cause and effect"* (Howell 2013, p. 40). Positivism became a critical approach to social science and what it could achieve. It emphasised observation of human behaviour (discounting things that couldn't be observed), and the principle of phenomenalism *"only phenomena and hence knowledge confirmed by the senses can genuinely be warranted as knowledge"* (Bryman 2012: 28).

Comte (1848) believed that human behaviour could be objectively quantified and measured in the same way as matter. Case numbers are studied to assess correlations and confidence levels to show the events that precede the

occurrences. Therefore, this negated any complications involved in studying individuals or groups regarding the inner workings of institutions. Laws were built upon causality and the behaviour of humanity was measured in exactly the same way as matter; thus human behaviour could be objectively quantified: *“As with the natural sciences there was little reason to investigate the meanings and purposes of matter; matter reacts to external stimuli and so did human beings. The task of the scientist whether social or natural was to observe, measure and explain”* (Howell, 2013, p. 41).

Phase 1 and 2 of the study by Gyllensten (2005) demonstrate a positivist philosophy through an investigation of coaching and experiences of stress in the workplace. This generates and tests hypotheses, gathers facts, is objective and provides scientific statements of the phenomema that takes place. However, there is a long-standing debate about the appropriateness of positivism (which relies on the natural sciences model) for the study of social sciences; that these two areas are fundamentally different (i.e. that the inanimate or non-human objects in the natural sciences are not expected to interpret their environment or themselves). Therefore Gurwitsch (1974) suggested that it requires a different methodology which reflects the distinctiveness of these and this is where phenomenology has become popular as a research philosophy.

3.1.2 Phenomenology (Subjective)

Phenomenology is concerned with a person's individual view of an event rather than the event itself (Smith, 1996). George Wilhelm Friedrich Hegel (1977) argued that this philosophy dealt with forms of consciousness, fundamentally, that the minds naïve comprehension of reality was external to itself. The

application of phenomenology to the social sciences is attributed to the work of Alfred Schutz (1899-1959). Influenced by the work of Husserl (1859-1938), Schutz outlined the fundamental difference between the focus of the social scientists compared to the natural sciences and that “*social reality has a specific meaning and relevance structure for the beings living, acting, and thinking within it*” (Schutz, 1962, p. 59). Therefore, the epistemology is required to demonstrate awareness, reflect and build upon that difference. He goes on to suggest that by “*a series of common-sense constructs they have pre-selected and pre-interpreted this world which they experience as the reality of their daily lives. It is these thought objects of theirs which determine their behaviour by motivating it*” (Schutz, 1962, p. 59). This philosophical approach is useful in order to gain a deeper understanding by which reality gains meaning, in other words, how do people perceive the impact of workplace coaching as impacting upon their well-being?

The study by Gyllensten (2005) initially demonstrated a positivist approach to measurement of coaching and experiences of stress in the workplace, however for the third phase of her research, she employed an Interpretive Phenomenological Analysis (IPA) for her investigation into participants’ experiences of coaching and perceived stress. This enabled her, in accordance with the benefits of phenomenology, to collect rich data about the coaching experience and participant’s perceptions. However, as suggested by Smith and Osborn (2008) the researcher needs to interpret the findings in order to understand the participant perception of their experience and furthermore, that individuals may have difficulty explaining what they are thinking or not wish to fully disclose to the researcher (Smith and Osborn, 2008). However, IPA has

been cited as particularly relevant for health psychology (Smith et al., 1999) in order to understand the meaning and the subjective experiences of patients (Smith and Osborn, 2008) and that it can also contribute where used with a combination of qualitative and quantitative approaches (Smith et al., 1999).

3.1.3 Definitions and Distinctions between Philosophical Perspectives

Positivism considers that:

“truth is consistent; that it is observable, understandable and exists in an external context...(the post-positivist would consider a truth as such until it was displaced and question whether humanity is able to fully understand truth)... [Phenomenology] considers that because interpretations of reality, knowledge and truth are intrinsically tied to the subject externality is difficult to establish, consequently truth and knowledge and the theories that reflect these are transitory and flexible” (Howell, 2013, p. 16).

Table 3 provides a broad separation between a Positivist, Phenomenological and also considers a Critical Realism (post-positivist) perspective on the constitution of reality, truth, knowledge and theory.

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

	Definition	Positivism (objective)	Phenomenology (subjective)	Critical Realism (retroductive)
Reality	Related to knowledge, separate from or a construction of the mind	Independent of humanity i.e. Objective	Humanity and reality are intrinsically linked i.e. subjective	Reality external to humanity and multi-faceted
Truth	<i>"reflections of reality based on evidence which is determined by an understanding of reality"</i>	Truth based on a reality independent of humanity	Truth based on a reality intrinsically linked with humanity	Truth based on a reality external to humanity
Knowledge	<i>"Our explanations and understanding of why reality and the truth and theories that reflect this are as they are"</i>	Knowledge based on immutable laws and truth stemming from a reality independent of humanity	Knowledge based on social constructions and truth stemming from a reality intrinsically linked with humanity	Knowledge doesn't depend on human activity: it is gathered or derived through a selection process and Reflexivity provides critical examination of different perspectives and standpoints.
Theory	<i>"Theory provides ways of explaining or giving meaning to understandings extrapolated from data...[and] is a means of reflecting reality, truth or knowledge"</i>	Immutable laws	Social Constructions	Approximation in idealised situations and explanation of phenomena (Howell, 2013)

Table 3: Definitions and distinctions from different philosophical perspectives - adapted from Howell (2013) p. 2 and 50-52)

Looking at the distinctive philosophical positions mentioned, it becomes clear that the chosen research philosophy will determine the scope, methods and

knowledge that is gained from the research. Much of the coaching literature explores quantitative methods of gathering data and a positivist approach; attempting to measure and compare what they believe to be an objective truth uninfluenced by the views and perspectives of the person (Kirk and Miller, 1986). Positivists argue that social science should establish laws and that these should be beyond challenge, as with the natural sciences, however, *“such an approach to knowledge generation and the realization of truth undermined the critical aspects of positivism and in many instances became a barrier to scientific discovery”* (Howell, 2013, p. 43). In contrast to this, a post-positivist recognises that reality is always influenced by the person researching it (Popper, 1963). Therefore, although a post-positivist (of which critical realism is one of the most common forms), would be looking to find an objective reality, they also recognise that it is almost impossible due to all the interpretations of the researcher and researched impacted from social, cultural and historic influences, furthermore, researchers (e.g. Fillery-Travis and Lane, 2006; Theeboom, Beersma and Van Vianen, 2014) have suggested there is a need to undertake research which explores the causal mechanisms of behaviour change. This presents an opportunity to build on the scientific rigour demonstrated by the positivist foundations of psychology research and explore the reality as impacted by the researcher and the researched.

As more about the nature of the human experience is learned, it becomes clear that reality may not be able to be fully explained by either a subjective or objective account. For example, while theories such as Maslow's Hierarchy of Needs and Carl Rogers' theory of the fully functioning person may inform an initial truth e.g. that we have a fundamental need to self-actualise (and that in positivist terms,

this can be measured and explained), this ability to objectively measure “reality” changes as participants are able to provide an accurate (and subjective) account of their understanding of their experiences. Furthermore, what about the possibility that reality cannot be fully understood and therefore explained by the participant? In this case, a critical examination on differing perspectives on the construct of reality may prove insightful and uncover the causal mechanisms which begin to explain the change that takes place.

In relation to this research topic, the relevance of these differing perspectives is that, unlike the content and definition of mental well-being, on which there is a plethora of research, the causal mechanisms of well-being are more elusive especially related to the impact of workplace coaching, and while participants may be able to account for the outcomes from coaching, it may not be so easy for them to explain how these were achieved. The retroductive nature of critical realism enables critical examination on differing perspectives and standpoints from multi participants and therefore, an opportunity to create inferences on the causal mechanisms in order to begin to explain how coaching works and the relation of coaching to mental well-being outcomes. It is therefore suggested that the philosophical position for this research project is to take a critical realism perspective. This is based on believing that there is a difference between how the participants describe, account for and understand changes that may take place in their well-being (because they may not be fully aware of it). Furthermore, having considered multiple perspectives, it enables the researcher to make inferences about the causal mechanisms that lie behind and are responsible for patterns and regularities in the findings.

3.1.4 Critical Realism

Critical realism is a movement in philosophy identified but not restricted to the work of Roy Bhaskar (Archer et al., 2013). It is concerned with recognising the discourses and events of the social world and the reality of its natural orders and events and pertains that *“we will only be able to understand – and so change – the social world if we identify the structures at work that generate those events and discourses”* (Bhaskar, 1989, p. 2). Furthermore, these structures can only be identified through the work of the social sciences (Bhaskar, 1989).

Critical realism provides a distinction between key objects of knowledge: transitive e.g. facts and theories, and intransitive knowledge (e.g. physical processes or social phenomena) (Bhaskar, 1989). This distinction is useful because it enables the researcher to consider what naturally occurs without having to understand it nor for it to be dependent on existing knowledge in order to understand it. This distinction gives critical realism a sophistication which isn't present in the other two opposing philosophies. Ackroyd and Fleetwood (2000) offer that it overcomes weaknesses associated with positivism such that it rejects “laws” in the social world and that event regularities mostly occur predominantly where artificially isolated from interference (“closed systems”) and that they wouldn't exist in the social world without a great deal of contrivance. They go on to critique critical realism in relation to postmodernism and suggest that *“while it retains a commitment to the socially constructed nature of the social world, it refuses to take the next, unwarranted step and conclude that the social world is merely socially constructed”* (Ackroyd and Fleetwood, 2000, p. 12).

Having abandoned the notion of causality, critical realism can now turn its attention to the cause of the event elsewhere in the ontology. Referring back to the research by Fillery-Travis and Lane (2006) and Theeboom, et al. (2014) who suggest that there is a need to identify the underlying mechanisms and processes in order to overcome limitations in the coaching literature; this addition to the research design can draw out the central form of reasoning utilised within critical realism which is helpfully undertaken through a process of retroduction which, as can be seen in Figure 16, involves making inferences about the causal mechanisms that lie behind and are thought to be responsible for observed changes (Bryman, 2012).

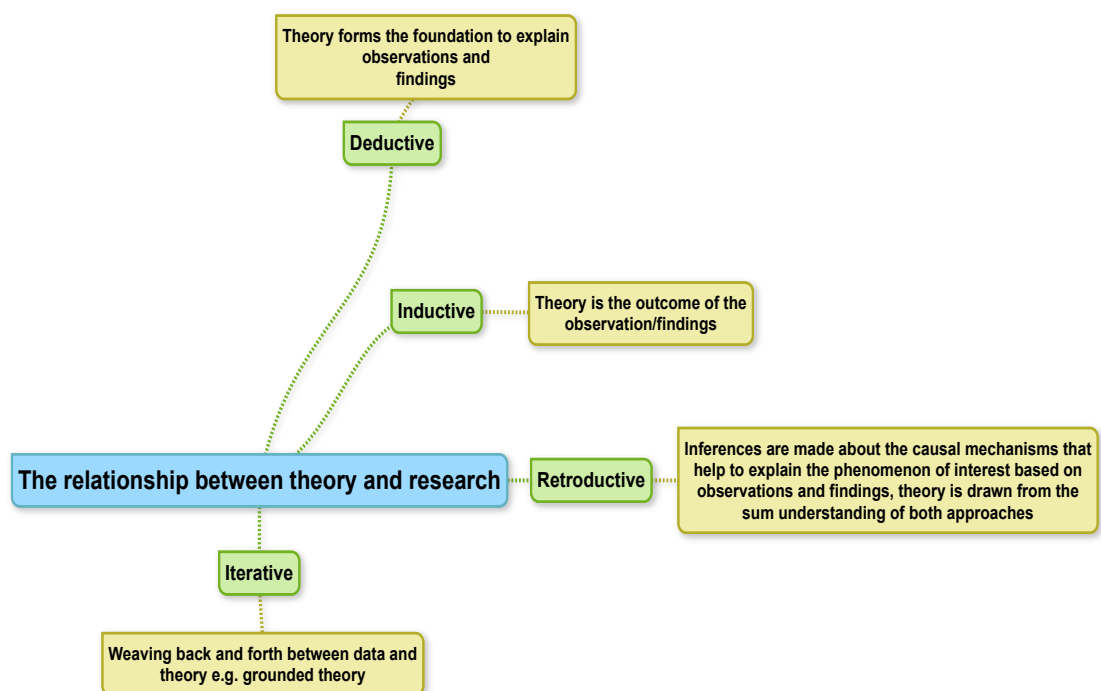


Figure 16 The relationship between theory and research

3.1.4 Critical Realism as a philosophy of methodology

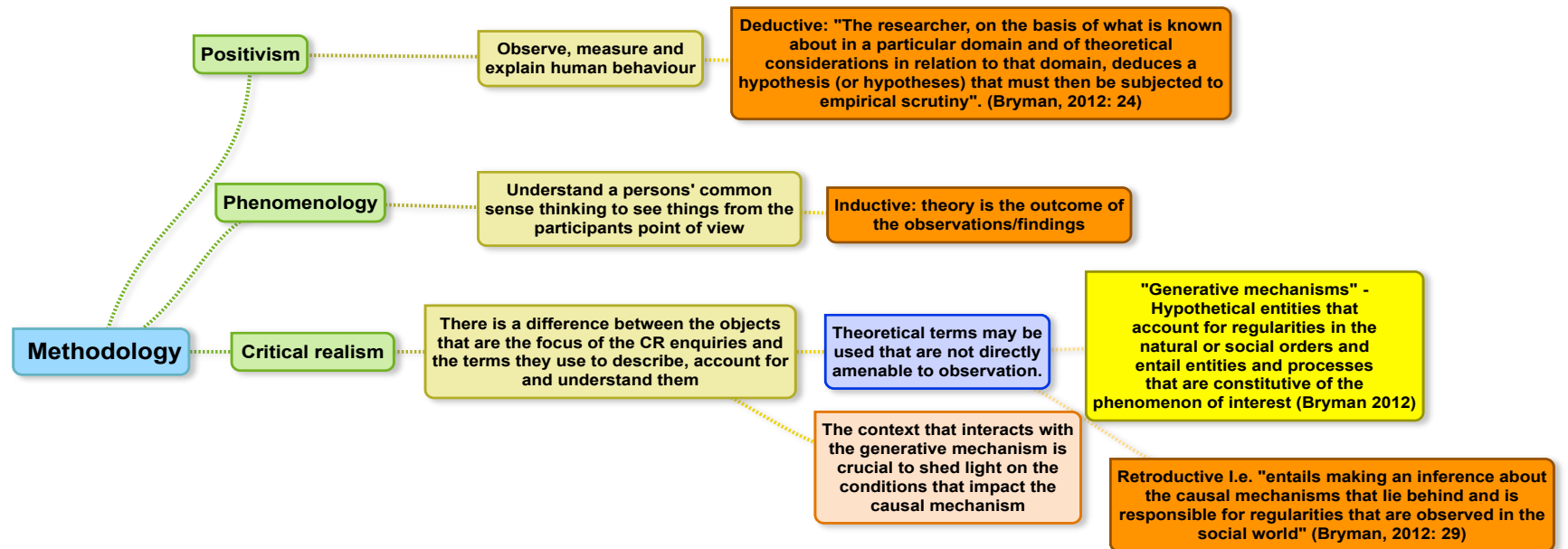


Figure 17 Overview of the methodological considerations that fit with philosophical positions

As discussed over the past few sections, there are some key differences between a positivist, phenomenological and critical realism approach to methodology, these are outlined in the flow chart above (figure 17). Predominantly, a positivist methodology aims to observe, measure and explain human behaviour by adopting a deductive approach to data analysis, whereas a phenomenological approach is inductive and aims to understand a person's common sense thinking in order to see things from the participants point of view. Conversely, a critical realist approach suggests that there is a difference between objects that are the focus of the critical realist enquiry and the terms used to understand, describe and account for them (Bryman, 2012). Therefore, in order to understand the objects of enquiry, a retroductive approach to data analysis requires making inferences about the causal mechanisms that lie behind and are responsible for regularities that are observed.

Critical realism has become increasingly popular within the social sciences and particularly within organisational and management research (e.g. Ackroyd and Fleetwood, 2000; Sayer, 2004; Ferris, 2014) this is especially as it overcomes difficulties associated with the positivist or phenomenological approaches. For instance it is not restricted to the notion of causality and furthermore offers to make a distinction between our understanding of the world as seen through ontology and epistemology (ontological realism and epistemological relativism as introduced by Bhaskar (1978, 1979) i.e. that participants may not be fully able to understand or explain the phenomenon of interest and it. Ryan et al. (2012) along with an increasing number of researchers, debate the benefits of adopting a critical realism ontology in the study of business relationships and networks and guide the researcher in applying a coherent and consistent research design.

Jones (2015) firmly grounded her research in the positivist approach in response to the existing research in the field of coaching, however, she also considered whether it would be worthwhile for future research contributing to the coaching literature to benefit from alternative epistemological approaches such as critical realism may offer: *“In the context of future directions for coaching research, a critical realist perspective may seek to understand the mechanisms by which coachees perceive change to occur as a result of coaching”* (Jones, 2015, p. 299).

Critical Realism has been chosen for this research project because this research aims to explain not only whether there is a change in the well-being of participants, but also to identify the related processes, structures and mechanisms which explain the relationship between the participant and their well-being; this is related to the critical realist perspective as described by Sayer (1992). Easton (2002) describes the critical realist approach as one that encourages reflection on key questions around why changes do or do not take place and critically the necessary conditions for this to take place. The perspectives and approaches of critical realism described by Sayer (1992) and Easton (2002) closely align with the gaps identified in the literature review i.e. that the coaching literature lacks research concerning the causal mechanisms responsible for changes to well-being and therefore is considered an appropriate methodology in order to meet the aims of this research project.

3.1.5 Complexities of the philosophy of methodology

Whilst this section has attempted to understand the different philosophical perspectives on which to guide this research project and considered associated methodologies, there are inherent complexities in understanding not only the terminology that is used, but also the variety of philosophical positions within each perspective e.g. post-positivist perspectives of critical realism and social constructionism. Furthermore, the terminology that is used can often be contradictory e.g. critical realism is referred to both as a philosophy and an ontology, so where the researcher decides to place its importance can confuse and complicate. Finally, there seems to be a lack of explicit publication of the theoretical positioning of research and as readers, we are therefore left to make assumptions based on the provided evidence. As suggested by Mir and Watson (2000) and commented by Kwan and Tsang (2001) and in line with critical realism *“we do need to be critical of our own theoretical biases and assumptions. Making them explicit is the first step of critical scrutiny (p.1167)”*. Therefore, in order to overcome this issue within the research presented here, the methodological positioning and implications have been made explicit. While this will naturally bias the research, the focus of critical realism is being used to frame and guide the research process in order to answer the research questions.

3.2 Paradigm of Inquiry

A paradigm of inquiry explains the beliefs relating to what should be studied, how it should be studied and how the results should be interpreted (Guba, 1990). Denzin and Lincoln (2000) suggested that it incorporates ontology (what reality is), epistemology (the relationship between the researcher and researched) and

subsequently the methodology (qualitative/quantitative/mixed methods) and methods (mean/mode of data collection).

3.2.1 Paradigm of Inquiry – Framework

Table 4 outlines the paradigm of inquiry for the research and particularly its relation to a critical realism perspective.

Philosophical Perspective	Critical Realism (Post-positivism)
Ontology	Reality exists but unable to be totally understood by humanity.
Epistemology	Objectivity pursued but abandonment of total separation between investigator and investigation.
Methodology	Mixed methods qualitative and quantitative
Methods	Mixed Methods: survey, focus groups, interviews, analysis of coaching sessions,

Table 4: Paradigm of inquiry – framework

Danermark et al. (2005, p. 5) suggest that within philosophy and at the core of critical realism, there is a “a switch from epistemology to ontology, and within ontology a switch from events to mechanisms”. He goes on to suggest that within the fundamental traits of critical realism, the ontology implies that there exists a reality which is changing, structured, stratified and differentiated (ontological realism); the epistemology is that our knowledge about this reality is fallible (epistemological relativism) and finally, that theory and methodological tools can

assist us in discriminating about how we use theories to inform us about our external reality (judgemental rationality).

In contrast to other methodological choices, the starting point could be ontology “*what properties do societies and people possess that might make them possible objects for knowledge*” (Bhaskar, 1978, p.13) rather than the epistemological question of “how knowledge is possible” (Danermark et al., 2005). This differentiation indicates consequences for research, which will be explored below.

3.2.2 Ontology

Critical realism is a relatively new philosophical perspective and it offers an opportunity within research to consider reality as shaped by investigative interests and theoretical resources (Mcevoy and Richards, 2006). In other words, it switches its focus from the event to the mechanisms that produce the event. It distinguishes between three ontological domains: empirical (reality that can be directly or indirectly experienced); actual (reality that occurs but not necessarily experienced) and “deep” structures and mechanisms that generate phenomena (Bhaskar, 1978; Delorme, 1999). Through a combination of theory construction and empirical investigation, the causal mechanisms which are not directly open to observation, can be observed and thus develop deeper levels of understanding and explanation (Mcevoy and Richards, 2006). Bhaskar (1978, p.36) suggests that scientific work is “*to investigate and identify relationships and non-relationships, respectively, between what we experience, what actually happens, and the underlying mechanisms that produce the events in the world.*” This is different to the empirical domain which suggests that all data or facts are always

mediated by our theoretical conceptions (reducing ‘what is’ to ‘what we can know about it’) (Danermark et al., 2005). Within this research project, reality will be pursued through an understanding of what participants experience in changes to their well-being and then through parallel modes of reality, results can be inferred through the causal mechanisms that help to explain how those changes were motivated to take place.

3.2.3 Epistemology

The beliefs and assumptions of the researcher are expected within critical realism to impact on the way knowledge is generated especially as epistemology within critical realism places the researcher as crucial in the interpretation of results because of the retroductive reasoning, which entails the researcher inferring what causal mechanisms contribute to regularities that are observed (Blaikie, 2004). As mentioned above, it is acknowledged within critical realism that knowledge about our reality is always fallible and therefore, methodological tools are adopted to assist us in approaching our judgements rationally. Reflexivity is a useful element in providing critical examination of different perspectives and standpoints and involves the dual aspect of reflection into how we are constructed in a social construct, as well as acknowledging constructive elements on behalf of the researcher (Howell, 2013). Denzin and Lincoln (2000) describes reflexivity as a “methodological innovation” and say that it encompasses investigators seeking ways to demonstrate to the reader considerations for the impact of the researcher on the research i.e. historical/geographic situation, personal biases and investments, surprises and “undoings” in the process of carrying out the research, the impact of their chosen literature search, and/or ways they may have

suppressed or avoided different points of view. As suggested by Sayer (2004, p.13-14) *“Social science, including the sociology of science itself, could benefit from greater reflexivity about its own conditions of production...and critical realism could do well to explore this currently underdeveloped side of its philosophy and methodology of social science.”* Reflexivity provides a useful lens from which to explain different standpoints and perspectives and may guard against misrepresentation of the objective reality. Therefore, it is helpful to understand about the beliefs and experience of the researcher as this will impact upon the analysis of the evidence.

Personal beliefs and experience of the researcher in relation to the research

Section 1.5 of the introduction explained the inspiration and background of the researcher and in particular that she has fifteen years' experience as a workplace coach and of this, ten years specialising in well-being. This experience will inevitably frame the process of retrodution as she recognises the following beliefs (a) coaching can be a useful intervention to instigate positive changes in your life/work (b) coaching can be utilised to impact positively on mental well-being, (c) coaching has not been given the recognition of other interventions (e.g. counselling) at improving mental well-being and therefore is under-utilised in this respect, (d) mental well-being is vital for the success of businesses and the flourishing of society. Reflexivity is useful in this instance because these biases can be recognised and overcome through a rigorous research process but also guide the inherent motivation behind the research.

3.3 Methodology

This section will aim to identify and analyse methodologies in relation to paradigms of inquiry, clarifying the distinctions between different methodological approaches and proposing which would be most appropriate for research into an analysis of the field of mental well-being and how coaching is related to its improvement within a population of working adults. It will also discuss the differences between methodology and methods and assess problems for different modes of data collection, focusing in particular on the methods most appropriate for the chosen research topic.

3.3.1 Qualitative, Quantitative and Mixed Methods

Whilst there has been some debate about the divide in or between the general orientation to undertaking social research, it can be argued to comprise qualitative and quantitative research (Bryman and Bell, 2011). Each can be defined simply, however carry striking differences in terms of the role of theory, ontological concerns and epistemological issues.

Broadly speaking, quantitative research focuses on numerical forms of data, whereas qualitative analysis acquires focuses on utilising non-numerical approaches to data collection and analysis (Thomas and Hodges, 2010). Quantitative research *“entails a deductive approach to the relationship between theory and research, in which the accent is placed on the testing of theories; has incorporated the practices and norms of the natural scientific model and of positivism in particular, and embodies a view of social reality as an external, objective reality”* (Bryman 2012, p. 36).

By contrast, qualitative research can be construed as a methodology that places an emphasis on *meaning* and it is generally agreed that within this research, there is more than one way to gather meaning from data and this is specific to the context, therefore the subjectivity of the data is recognised along with the relationship between the researcher and the researched (Braun and Clarke, 2013).

3.3.2 Fundamental differences between quantitative and qualitative research strategies

	Quantitative	Qualitative
Principal orientation to the role of theory in relation to research	Deductive; testing of theory	Inductive; generation of theory
Epistemological orientation	Natural science model, in particular positivism	Interpretivism e.g. phenomenology
Ontological orientation	Objectivism	Constructionism

Table 5: Fundamental differences between quantitative and qualitative research strategies (adapted from Bryman, 2012, p. 36)

Lincoln and Guba (1985) identified five underlying assumptions in these contrasting approaches to research:

1. Nature of Reality (ontology): qualitative researchers believe there to be multiple versions of reality which are socially constructed whereas for quantitative researchers, reality is assumed to be fragmentable, single and tangible.

2. Role of Researcher and Researched (epistemology): quantitative research provides a clearer definition of each of these roles and it is independent from the research, whereas for qualitative research there is an interaction between the researcher and researched which makes the researcher more powerful than the researched.
3. Generalisability: quantitative research shows these to be positioned at population level and temporarily and contextually free whereas for qualitative research, the results are embedded within the context.
4. Nature of causality: causal mechanisms are discovered and largely conceptualised as linear whereas qualitative research places an emphasis on the nature of causality as interactive.
5. Value laden/value free: quantitative research is ideally thought to be well-planned, careful and value free so that “facts” can be discovered; qualitative research is thought to be inherently value-bound and are therefore usefully presented to the reader to be used in evaluating the study.

Some writers suggest that research methods carry commitments for ontology and epistemology, such that self-completion questionnaires corresponds with a natural science model, and the use of participant observation implies interpretivism and constructionism: *“the choice and adequacy of a method embodies a variety of assumptions regarding the nature of knowledge and the methods through which that knowledge can be obtained, as well as a set of route assumptions about the nature of the phenomena to be investigated”* (Morgan and Smircich 1980, p. 491).

Although the above provides a useful differentiation between qualitative and quantitative research methods, often the split is not as clear as the above implies. For instance, studies that are quantitative in nature may be interpretive in epistemological considerations, or a qualitative study may test theory rather than generate it. What can be said is that there is a tendency for quantitative and qualitative research to be associated with the epistemological and ontological positions as outlined by Lincoln and Guba (1985).

It has been suggested that qualitative approaches can be relevant and valuable in the evaluation of coaching (Coe, 2004). Furthermore, Griffiths (1999) suggests that the richness and meaning of the experiences of individuals can usefully be evaluated through qualitative methods, while Miller, Dingwall and Murphy (2004) suggests that qualitative research can explore how outcomes are achieved considering the focus on the contextual and complex nature of organisational settings.

Jones (2011) suggests that quantitative research in the social sciences has been “attached” to a positivist philosophy and is claimed by some as limited to quantification and therefore “defunct”. However, by utilising quantitative methods alongside other practices (such as is undertaken within critical realism), this enables a multi-layered and stratified ontology. This is especially relevant in this research which is looking at the causal mechanisms of change and the associated processes which may contribute to that change within an organisational setting.

3.3.3 Mixed Methods

An increasingly popular form of research is that which combines qualitative and quantitative research within a single project and that the data deriving from both research methods is equally as illuminating as data derived separately. It is argued by critical realists that the nature of the research problem should dictate the choice of methods utilised and as suggested by Olsen (2002), this is often achieved through a combination of qualitative and quantitative methods. Two groups of researchers characterised as either “purists” or “pragmatists” form debates about the question of combining methods (Tashakkori and Teddlie, 1998). This includes the idea that qualitative and quantitative research are separate paradigms and that research methods carry epistemological and ontological commitments. Methodological purists suggest that there is almost no common ground between methods because they are based on mutually exclusive assumptions and therefore the methods are incommensurable (Guba and Lincoln, 1989). However, several pragmatist researchers (e.g. Tashakkori and Teddlie, 1998; Johnson and Onwuegbuzie, 2004) have suggested that a mixed method approach can be complimentary and useful to address various research questions, furthermore enabling the researcher to approach the research not encumbered by epistemological and ontological issues (Bryman, 2006). Relevant to this research project, Griffiths (1999) and Miller, Dingwall and Murphy (2004) have suggested that this approach has relevance to organisational research, and it has also been suggested by Duignan (2004) that the mixed method approach has potential to be utilised to measure the effects of coaching. This has been demonstrated in several studies (e.g. Gyllensten, 2005). It has also been used as an approach to investigate the use of a mental

health promotion programme as an intervention to promote well-being and resilience (Ross, 2014).

Pratschke (2003) suggests that for critical realists, what is most important is how qualitative and quantitative methods are used. Creswell, Creswell and Ivankova (2004) suggests that there is considerable scope for confusion when utilising this approach and researchers need to provide careful consideration to their choice and rationale for using mixed methods. There are several different ways of combining qualitative and quantitative research through the mixed methods approach. Bryman (2006) carried out a content analysis of articles deriving from mixed methods, he found that the following were the rationale for combining methods and provide an indication of varying approaches to this method: triangulation; offset, completeness, process, different research questions, explanation, unexpected results; instrument development; sampling; credibility; context; illustration; utility; confirm and discover; diversity of views; enhancement; other/unclear; or not stated.

Having considered the different methodologies, the main rationales for a mixed method approach for this research project are “completeness”, “process” and “confirmation” from the above approaches. “Completeness” refers to the notion that a more comprehensive account of the research can be found by combining qualitative and quantitative measures; and “process” supports the critical realism philosophy that the quantitative research will help to provide an account of the structures of social life but the sense of process can be attained by the qualitative research (Bryman, 2006). Further to this, Mcevoy and Richards (2006, p. 73)

suggest that for critical realists, “*methodological triangulation for the purposes of confirmation and completeness may also play a valuable role in the research process*”. This approach entails “*using more than one method or source of data in the study of social phenomena*” (Bryman and Bell, 2003, p. 291). Reliability and validity can be gained by triangulating the research data for the purpose of confirming the findings by counteracting findings (Denzin, 1989; Shih, 1998) and corroborating data to support a more robust conclusion (Risjord, Moloney and Dunbar, 2001).

Risjord, Moloney and Dunbar (2001) suggest that triangulation in addition to being employed for confirmation and completeness is also usually utilised for “abductive inspiration” (retroduction). This is suggested by Mcevoy and Richards (2006, p. 72) to provide a valuable role in a critical realism research strategy because “*detailed observations may provide a platform for making retroductive inferences about the causal mechanisms than are active in a given situation*”. Therefore, within this research project, utilising a mixed methods approach will enable the researcher to triangulate the findings through both qualitative and quantitative research and make inferences from the findings in order to provide a clearer picture of the situation. By incorporating a qualitative element, this will provide rich data to illuminate the reasons *how* the mental well-being of a participant is impacted, along with the causal mechanisms responsible, while quantitative research (taken through a questionnaire) will provide insight as to *how much* the participant’s mental well-being was impacted, overall offering a much deeper understanding of the process of coaching that contributes to mental well-being.

3.3.4 Implications of the literature in selecting the appropriate methodology

The evidence discussed in the previous chapter demonstrates a growing interest in the exploration of coaching as a “methodology” for enhancing well-being. As highlighted within meta-analysis of coaching outcomes (Theeboom, Beersma and van Vianen, 2014) there is a growing consensus that coaching does impact positively on well-being and other outcomes, furthermore, that stimulating sustained well-being and functioning is the ultimate aim of coaching (Grant, 2003; Grant, 2012). The opportunity to develop the research field further is heavily influenced by the research methodology that is chosen. Previous research has been undertaken within the field of coaching psychology, stemming from a positivist philosophy and focusing heavily on quantitative methodologies exploring coaching and its impact on different elements of well-being. This has resulted in widespread adoption of quantitative measures including: self-report goal attainment scale (Spence, 2007); Depression, Anxiety and Stress Scale (DASS) (Lovibond, 1995); Satisfaction with Life Scale (SWLS) (Diener et al., 1985); Positive and Negative Affect Scale (PNAS) (Watson and Clark, 1988); Ryff’s Scales of Psychological Well-being (Ryff, 1989).

However, it was also acknowledged in the previous chapter that there is an opportunity to develop knowledge further by exploring the causal mechanisms by which change may take place and this may be through adoption of a qualitative methodology. Gyllensten (2005) provided insight into this through the adoption of a mixed quantitative and qualitative methodology to investigate whether coaching could reduce perceived *stress* in the workplace; the qualitative

methodology employed Interpretive Phenomenological Analysis (IPA) which provided rich data subsequently grouped into themes to explain their experiences of coaching.

Meanwhile, there are limited qualitative or mixed-methods studies relating to the impact of coaching on personal well-being. One study was found relating to the impact of coaching on workplace *well-being* using both qualitative and quantitative measures carried out by Grant et al. (2009). This study utilised the Goal Attainment Scaling (GAS) and Depression, Anxiety and Stress scale which have been used in other studies cited already, however with the addition of resilience as measured by the Cognitive Hardiness Scale (Nowack, 1990) and the Workplace Well-being Index (WWBI) (Page, 2005). For qualitative measures, they asked participants to respond to two questions: “What specific positive benefits (if any) did you gain from participating in this program?” and “What specific positive outcome (if any) have flowed into your workplace?”. Further to this, two additional studies were found to utilise mixed methods relating to education: Grant (2008) and Green et al. (2014), however, the qualitative measures related to student feedback which offered validation about the impact but which is inherently subjective. The benefit of these studies is that they offer an opportunity to delve deeper into the participant perceptions and experiences.

3.3.5 Identification of problems/issues based on research

As outlined in the literature review, there is a growing body of evidence about the impact of coaching on a variety of positive psychological outcomes, however, these findings should be interpreted cautiously. The evidence around the validity

of coaching is limited: there were only 93 articles published between 1937 and 1999. Although there were 634 articles and dissertations on coaching by 2011 (Grant et al., 2010) *“Most of the empirical literature to date is contextual or survey-based research about the characteristics of coaches or coachees, or about the delivery of coaching services, rather than outcome research examining the efficacy of coaching as a methodology for creating individual or organizational change”* (Grant et al., 2010, p.13). Furthermore, there are few replications and the methodology undertaken varies considerably.

It should also be noted that many of the studies utilised samples that were self-selected and may not be representative of the general population in that it is not possible to objectively determine the veracity of the results, and they need to be triangulated by some other measure, additionally, that being self-selected, participants may have been particularly motivated to achieve their goals.

There is also a lack of research to understand the process by which mental well-being can be improved. *“The biggest overall limitation of the coaching literature is the lack of rigorous examinations showing the causal mechanisms by which coaching interventions are effective. Thus, we agree with Fillery-Travis and Lane (2006) that it is time to shift attention from the question “does it work?” to “how does it work?”. This second question can only be answered by building a firm theoretical framework that can be used to identify the underlying mechanisms and processes”* (Theeboom et al., 2014, p. 14). Due to the dynamic nature of mental well-being, understanding this process is complicated; not only in its ability to be defined, but in the recording of that change and the contributing factors

towards any change. Qualitative measures may help to extend the research into the new area of the psycho-dynamics of well-being and gain understanding how coaching can help to improve well-being measures. This gap in the research opens possibilities to explore the process by which coaching creates change and whether that change applies to mental well-being and this is the aim of this research project.

3.4 Chosen Research design

This section will outline choices relevant to a mixed-methods research design, and then follow with the choices for the methods of data collection.

There are five predominant research designs: experimental; cross-sectional/survey; longitudinal; case study and comparative. These provide a framework for collecting and analysing data and reflect decisions about the range of dimensions of the research process and the priority given to these (Bryman, 2012). The following outlines some of the potential design implications for this research.

Firstly, the experimental design has been largely encouraged within psychology research as it provides high levels of validity (Bryman, 2012) and in particular, several of the research studies discussed in the literature review utilised randomised controlled trials (e.g. Green, Oades and Grant, 2006; Spence and Grant, 2007; Grant, 2014). However, the implications of this design are considerable in terms of practicalities for workplace research in that it is more difficult to find workplaces that are happy to participate in research randomly

allocating participants to experimental or control groups, furthermore, that it is difficult to control factors within the workplace which might impact upon the research findings. For these reasons, quasi-experimental which satisfy certain characteristics of experimental designs without accounting for all internal validity requirements (Bryman, 2012) have become more popular (e.g. Gyllensten and Palmer, 2005a; Evers, Brouwers and Tomic, 2006). The research undertaken for the study presented here will satisfy some elements of experimental design in that it will have a control group however, the practicalities of satisfying the further elements (e.g. the manipulation of the independent variable in order to determine causality) of an experimental or even quasi-experimental research design are not feasible.

A case study research design is concerned with the complexity and nature of the case in question (Stake, 1995), therefore it is ideally suited to workplace research where the workplace is the case in question. However, the research here is not specifically concerned with the actual workplace, rather it is considering the impact of the coaching on the people who happen to be in the same workplace, as opposed to the impact on the workplace itself.

Longitudinal research has been cited by Linley (2006) as important within coaching research in order to document and explain the change process that takes place over time and this has been reinforced by Gyllensten and Palmer (2005b) who recommended the development of coaching research to include longitudinal designs. However, by their nature, they take place over longer periods of time and therefore imply additional costs in terms of time and

investment. While the research here entails elements of longitudinal design in that measurements of well-being will be taken at more than one point in time, the benefit of a longitudinal design might be to offer an explanation of how well-being changes over the time period i.e. whether changes are sustained post-intervention. This would entail taking further measurements and analysis outside of the 6-month timeframe and has been deemed not to be possible in this instance but is recommended for future research in order to develop the research about the ongoing impact of coaching post-intervention and whether in that sense, coaching represents a good investment in time and money.

'A cross-sectional design entails the collection of data on more than one case (usually quite a lot more than one) and at a single point in time in order to collect a body of quantitative or quantifiable data in connection with two or more variables (usually many more than two), which are then examined to detect patterns of association' (Bryman, 2012, p. 58). This design is often associated with quantitative research but can also be utilised for qualitative research for example in unstructured or semi-structured interviewing. It often utilises surveys, but also is commonly associated with other research methods such as structured observation, official statistics, content analysis and diaries. Similar to experimental design, it is difficult to establish causal direction from the data and there can be issues with validity, Babbie (2007, p. 276) suggests that it is also hard for a survey to develop a feel or understanding of an individual's "total life situation". For this research project, the use of a survey enables data to be collected to provide information about the participants well-being both at the start and end of the coaching process. This data can be analysed to provide insight

into the difference between the well-being scores of participants. As mentioned, it is difficult to establish causality and therefore, combining methods can contribute to understanding the data and building knowledge about the causal mechanisms contributing to recorded changes in line with a critical realist perspective.

A comparative research design *entails studying two contrasting cases using more or less identical methods. It embodies the logic of comparison, in that it implies that we can understand social phenomena better when they are compared in relation to two or more meaningfully contrasting cases or situations'* (Bryman, 2012, p. 72). It can be used in either qualitative or quantitative research design utilising data collection strategy often in cross-cultural or cross-national research.

This design carries problems such as managing and gaining funding, gaining comparable data, ensuring equivalency in the sample, ensuring data collection instruments do not undermine genuine comparability, and ensuring the context of the data remains intact. Having said that, by comparing two or more cases, it improves theory building and may play a crucial role in relation to the understanding of causality.

In this design, the predominant compared cases are those who will receive coaching (coaches/coachees⁴) and the control group (coaches who won't receive coaching). However, further elements of comparison are also possible by

⁴ For the above purposes, "coachees" will incorporate both the In-house and private coachees except where explicitly specified.

comparing the variables, for instance the coaches and control are both trained as coaches therefore this can be compared to the coachee group in order to determine the difference between the two groups in terms of their well-being scores. Furthermore, the coaches will attend a full coaching and well-being training programme over six months whereas the coachees will only receive the workplace coaching sessions. This design enables these variables to be compared and contrasted in order to make sense of the data and in particular with the control group, to understand the impact of the coaching element.

3.5 Methods of data collection

Utilising a mixed methods approach, there are several choices present for the methods of data collection. Bringing together the methodology, research design and methods of data collection, table 6 shows the relationship these have with each other.

RESEARCH DESIGN	METHODOLOGY	
	QUANTITATIVE	QUALITATIVE
EXPERIMENTAL	Quantitative comparisons between experimental and control groups with regard to the dependent variable	no typical form. However, Bryman, (1988, pp. 151–152) notes a study in which qualitative data on school children were collected within a quasi-experimental research design
CROSS-SECTIONAL/SURVEY	survey research or structured observation on a sample at a single point in time. Content analysis on a sample of documents.	Qualitative interviews or focus groups at a single point in time. Qualitative content analysis of a set of documents relating to a single period.
LONGITUDINAL	Survey research on a sample on more than one occasion, as in panel and cohort studies. content analysis of documents relating to different time periods	Ethnographic research over a long period, qualitative interviewing on more than one occasion, or qualitative content analysis of documents relating to different time periods. such research warrants being longitudinal when there is a concern to map change.
CASE STUDY	Survey research on a single case with a view to revealing important features about its nature.	The intensive study by ethnography or qualitative interviewing of a single case, which may be an organisation, life, family, or community.
COMPARATIVE	Survey research in which there is a direct comparison between two or more cases, as in cross-cultural research.	Ethnographic or qualitative interview research on two or more cases

Table 6: Research design for different methodologies (adapted from Bryman (2012, p.76))

Table 6 would suggest that for a comparative, survey design, it may be appropriate to utilise surveys, focus groups and qualitative interviews and therefore the following methods are suggested:

Method of data collection	Quantitative outcomes	Qualitative outcomes
National Accounts of Well-being Survey	Well-being score at the start and end of the coaching intervention	
Semi-structured interview		Qualitative data concerning the coachees opinions about changes to their well-being and the mechanisms contributing towards any changes in well-being.
Focus group		Qualitative data concerning the coachees opinions about changes to their well-being and the mechanisms contributing towards any changes in well-being.
Mixed-method interval questions	Interval scores rating the participants subjective well-being score.	Qualitative data relating to the coachees opinion about the impact of the coaching on their well-being as well as reflections about their well-being between the coaching sessions.

Table 7: Methods of data collection for different methodologies

The combination of the mixed methods approach means that detailed data can be obtained on both the qualitative and quantitative components answering questions involving the impact of coaching on mental well-being as well as understanding the 'how' and 'why' coaching may impact on mental well-being, thus demonstrating the causal mechanisms responsible for any changes recorded. The combination of participants who experience coaching as well as the background of the participants (coaches or non-coaches) and the further addition of training, enable a cross section of data to be collected which will enrich the findings. While it is acknowledged that this approach may take more in terms of skill and resources, it is considered a more appropriate course of research to provide value both for the researcher, community and participating organisation.

3.6 Consideration of rationales for specific methods of data collection

This chapter, so far, has considered and suggested specific methods that will be adopted for the collection of data. The following section will consider the practical application, the rationale behind that suggestion along with benefits, challenges and suitable suggestions to overcome those aspects.

3.6.1 The National Accounts of Well-being survey

All participants will complete the National Accounts of Well-being Survey at the beginning and end of the programme. This involves 53 questions exploring both psychological and subjective well-being, both of which were demonstrated in the literature review as important aspects to accurately reflect mental well-being.

Surveys are a useful research tool in order to collect data (in this case by questionnaire) at a single point in time and with opportunities for follow up repeat data. The survey which has been chosen to analyse the well-being of participants at the start and end of the programme is the National Accounts of Well-being Survey. This was designed by Huppert et al. (2009) based on a cross-national dataset from the European Social Survey, released in Autumn 2007, which contained detailed measures of the individual experiences of over 40,000 people. This contributes towards the rigour of the survey and provides a large databank on which new results can be compared in order to build up an understanding of how these results compare to the European national average.

“In 2005, the ESS became the first social science project to win the Descartes Prize for ‘excellence in scientific collaborative research’. It has subsequently been selected as one of a small number of projects which form part of the European Roadmap for Research Infrastructures. In 2008 a top-level review commissioned by its 35 funders concluded that the ESS: ‘...has generated new insights and knowledge on key issues, problems, and topics within the social sciences’ ... and... ‘improved standards of methodological rigour and transparency, raising international standards of fieldwork, questionnaire design and sampling for other European social surveys and market research, especially in countries which lack accumulated expertise in survey research.’ So the ESS has swiftly become an authoritative source of reliable data about Europe’s evolving social fabric and a key vehicle for knowledge transfer” (ESS, 2013, p.1).

It was from the ESS data that the national accounts framework was constructed.

“A key aim in the design of the module was to measure both the feelings and functioning aspects of well-being, as well as psychological resources. A further aim was ‘to go beyond individualistic aspects of well-being, by incorporating measure of social or interpersonal well-being” (Michaelson et al., 2009, p. 19).

The survey reflects the importance of both personal and social well-being, reflected in the top-line indicators, one for each, as well as a separate indicator

for well-being at work. To counter the argument that the survey only takes data at a single point in time, the quantitative aspect of participant's survey data will be interrogated at the start and end of the intervention.

3.6.2 Qualitative semi-structured interview

An interview can be structured, unstructured or semi structured and allow an opportunity to gain qualitative data from the interviewee (Braun and Clarke, 2013). In the context of this research, the interviews will be semi-structured to allow for the structure of a list of issues to be covered as well as the freedom to follow points of interest that arise during the course of the interview. It could be argued that a semi-structured interview may be too rigid, however, due to the topic of research and the multiple aspects, it is important to ensure that both the "how" and "why" of coaching will be explored.

Based on the research questions, coaches and coachees will be interviewed for 45mins around 3 areas: any changes they considered had taken place in relation to their well-being; any changes they consider have taken place in relation to the well-being of the coachees; their opinion about coaching and its relevance for impacting on well-being. The interview questions will be set however the interviewer will use techniques to put the interviewee at ease (e.g. general conversation), probing and exploring for depth and understanding based on the answers which will be provided in the interviews.

The quality of the interview depended largely upon the quality of the structure and the willingness of the participant to engage in the interview process. For that

reason, the interviews will be set up after the end of the coaching, when the interviewer and participant have developed a working rapport, and the coaching/training process has given insight into the aspects that need to be explored during the interview. This will be more difficult for the coachee interviews where the interviewer will not have been the coach and therefore not have had any prior direct contact with the coachee other than to set up the survey, additionally it will also impact on the interviews with the private coachee group, with whom the interviewer will also be undertaking the coaching. While this may not be overcome directly, it can be taken into account within the set-up of the interviews and in the awareness of the interviewer in waiting for/probing for answers, for example recognising that it may take longer for the coachee to engage in the interview process more freely.

3.6.3 Focus Groups

As part of the second training day, a focus group will be held. In contrast to the semi-structured interview, the focus group will enable the researcher to take the role of facilitator in order to facilitate the discussion among the participants on what they feel contributed/detracted from their well-being. The individuals will take the lead to set the direction of the discussion and the facilitator will aim to stimulate that discussion with questions and comments on a range of contributing factors that have been part of the research design.

In order to give rigour and validity to the focus groups, the participants will be split into 4 groups each containing 4 coaches, each taking one research question to discuss in detail for 25-30mins. The sessions will be recorded with participant

permission, and then a representative from each group will feedback their comments to the group as a whole (which will also be recorded). This will offer the opportunity for in-depth comments on 4 research questions to be gathered, and then wider opinions and questions gathered as part of the whole group discussion.

Although this is not a usual way of conducting a focus group, it has been chosen in order to explore participants opinion of each of the research areas (outlined in the research outline above) before they complete the National Accounts of Well-being Survey for the second time and receive formal feedback about changes to their well-being. This enables an unbiased result which is uninformed by what they have been told happened to their well-being score and offers further opportunity to explore the difference between actual and perceived reality.

3.6.4 Mixed methods questions/structured diaries

Prior to the first coaching session, each of the participants (coaches only) will be asked to complete a detailed form which collects information about them, what they are looking to improve through the coaching, where they rate themselves concerning well-being, and some exploratory questions which could provide areas to explore within the coaching.

Then, at the start of each subsequent coaching session, each of the coaches will be asked to complete a form which outlines how they have progressed since the last coaching session and what they want to focus on in this session, along with any further information that may be helpful to the coach. Finally, at the end of

each coaching session, the coach will complete a short evaluation which looks at the immediate impact of the coaching on well-being.

In accordance with mixed methods, this research will utilise methods such as the above to add richness and depth to the research, it is felt that the above methods will provide an alternative approach which could provide depth and richness of data collected at several key points throughout the research, and which are “normal” within a coaching experience and therefore may provide more reliable data than specific research methods which need to be undertaken in addition to the coaching/training. However, it will be clearly explained that data gathered during these methods could form part of the research data.

The stated research questions imply that both qualitative and quantitative data needs to be gathered in order to meet the research aim. This has therefore defined the methodology and methods that are adopted in this research. It aims to explore, not only the quantitative aspects of “has the mental well-being changed” but also qualitative data about the process by which any change may take place.

3.7 Programme/Intervention Design

3.7.1 Sample size and Challenges

As with any research project, recruitment of participants is key and can be challenging, this research is no exception. It is aimed that 50 participants will be recruited. This is based upon research into similar (coaching) studies which demonstrated participant numbers were historically low (particularly for

quantitative research) where numbers varied from 20-63 participants (e.g. Green, Oades and Grant, 2006; Green, Grant and Rynsaardt, 2007; Spence, Cavanagh and Grant, 2008). However, it would be expected that quantitative research only would occupy higher numbers in order to infer causality. For example Gyllensten and Palmer (2005), carried out a multiple regression analysis, correlational design with 103 participants and Gattellari et al. (2005), carried out a randomised controlled study comparing peer coaching intervention with 277 GPs. There are further challenges concerning the distribution of the sample i.e. that the balance between participants, control and demographic data may not be equal. These will be taken into account in the presentation and weighting of the data.

The challenges associated with the qualitative elements again include the recruitment of participants – this is one reason why a mixed methodology has been chosen as this enables quantitative findings to be sought from participants who might not want to take part in the qualitative interview. Secondly, the researcher being absorbed within the research implies issues of bias. This is difficult to overcome however, this can be accounted for by the researcher having minimal contact with coaching the participants by structuring the programme in order that the coaches undertake the coaching where possible. However, it should be noted that issues of bias may be favourable to demonstrate loyalty to their coach and the researcher and therefore the results could be skewed. Finally, as numbers are specific to those in employment (and predominantly to one organisation), it doesn't necessarily mean that the results can be generalisable. However, it will provide data within the context of the organisations and which can then be replicated in further research.

The challenges associated with the quantitative elements include the choice of research tool – there are many research tools for well-being, and many studies use several tools. It is felt that the National Accounts of Well-being Survey is suitable because it was created from the largest dataset on well-being and concurs with arguments for measuring both psychological and subjective well-being. Another challenge is having suitable numbers to give the research validity, which has already been discussed.

It is possible that as the results of the survey need to be transferred manually into SPSS, that it could be open to researcher error in analysing the data, this will be double checked for quality. Finally, it is possible that participants could feel that they need to show an improvement in their well-being the 2nd time that they complete the survey and therefore influence the results. The recording of a control group will help to account for this along with any other external factors which may contribute to the results, which will be explored throughout the research.

3.7.2 Participants

Randomised controlled trials (RCT) have become increasingly popular as the gold standard for evaluation of interventions within psychology and mental health in particular and recommendations both from Government reports (e.g. Jenkins et al., 2008) along with coaching psychology researchers e.g. Passmore (2011) and Lai and McDowall (2018) have led us to believe that this would be the preferential form of conducting quantitative research. However, due to the opportunistic style of recruitment of the participants, it is recognised that an RCT

would be unfeasible and instead, a control group will be recruited (see below), in order to aim to demonstrate that any changes that take place may be due to the coaching/programme. The following structure will be undertaken:

1. Initial contact with participants will be made through email and a research information sheet will be sent to all the coaches (via an internal administrator) and expressions of interest will then be made to the administrator within the organisation.
2. Those expressing interest to attend the research programme will be emailed further detail about participation, dates and an overview of what would be included within the training, coaching and research. Participants who are unable to attend due to commitments but are still happy to be involved, will be invited to be part of the “control group”;
3. The coaches, as part of their internal coaching role (separate from the research), will be matched with people in the organisation who are seeking coaching. The enrolled coaches will then ask the people who they were coaching during the research period if they would be happy to be part of the “coachee group”;
4. All of the participants from the coaching and training group will take part in a coaching for well-being programme over a 6-month period incorporating 2 training days, 3 co-coaching sessions and an online blended learning course. As part of this, they will be asked to complete several research measures and will receive feedback on their well-being score at the start of the programme and again once all research phases are complete.

5. The control group will be sent the well-being survey at the start of the programme and once the participants have completed the programme but will undergo no further research intervention until the research is complete at which point they will be emailed their well-being report detailing their results.

3.7.3 Coaching Programme design

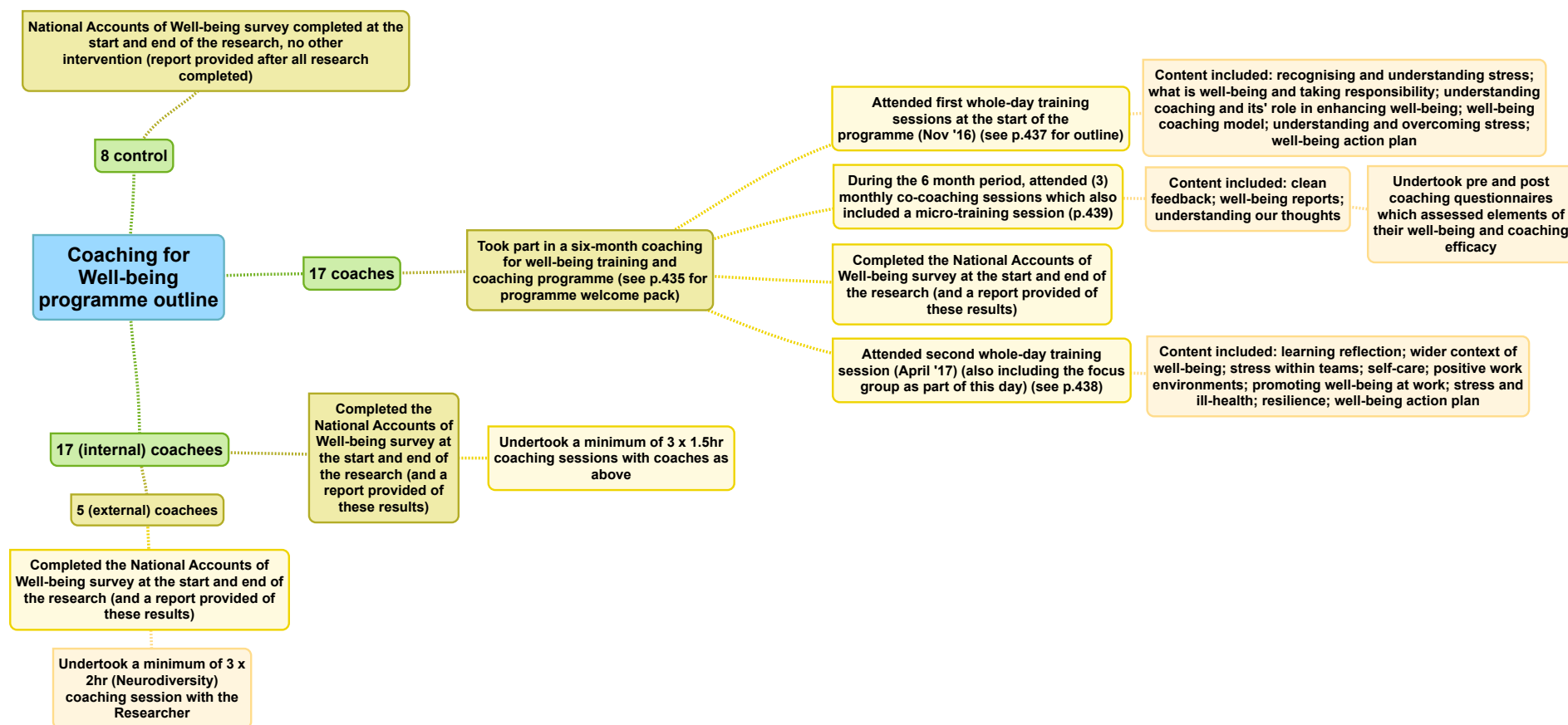


Figure 18: Overview of the Coaching for Well-being/Research Programme

Phase 1 – Coaches (Coaching and Training)

The coaches recruited for phase 1 will be qualified or working towards an ILM level 5 coaching qualification and therefore have experience and skills working or volunteering as a coach. The purpose of the coaching for well-being training programme is to provide a coaching and training intervention which will equip the coaches with further tools focusing on well-being to support them when working with coachees. While the coaching will equip the participants with new coaching tools to utilise, it will not be prescriptive, it is likely therefore that a range of coaching disciplines will be used within the coaching sessions. This is part of the design because it enables freedom to recruit coaches who may have differing skills and coaching styles, the application of which may form part of the research (as explored through the interviews).

As identified in figure 18, the coaches will take part in a 6-month coaching and training programme. This programme has been written, piloted and refined by the researcher within her own coaching practice and will include: 2 training days: the first of which will train the coaches in essential elements of mental well-being and techniques associated with coaching as applicable to mental well-being. The second training day will take place at the end of the coaching programme and cover further elements in reflections on their own well-being, resilience skills and well-being at work. It will also include a focus group that will form part of the research findings.

The coaches will also take part in three co-coaching sessions, designed as an opportunity to practice new coaching skills and reflect on their own well-being. This is a key part of the programme as it aims to measure the impact of the

coaching/training on the well-being of the coaches as well as coachees. As with all the participants, the coaches will also be asked to complete the National Accounts of Well-being Survey. A report of their personal well-being profile will be provided to the coaches during the co-coaching sessions and therefore enable them to reflect on their own well-being and utilise the coaching to make improvements.

Finally, the coaches will be given an online blended learning course to complete which will ensure that they all have the same base level of knowledge about stress and well-being.

Phase 2 – Coachees

As already mentioned, the coachees will be invited to participate in the research via the coaches. The structure of the coaching sessions (as dictated by the organisation) is three sessions lasting 1.5hr each). Again, it will not be regimented what coaching style should be utilised, and therefore a range of coaching skills as above may be employed.

Phase 3 – Coachees (private)

For this phase, the coaching will be conducted by the researcher. Participants will receive between 3-5 coaching sessions which will last for 2hrs. The coachees will come from a variety of organisations and have sought coaching to assist elements of neurodiversity, of which stress/well-being is one of them. A variety of coaching skills and techniques will be utilised as appropriate.

3.8 Ethics

As this research involves people, there are several ethical considerations. As a professional coach, the researcher for this research project is expected to act in line with the Professional Standards of their membership body – The International Authority for Professional Coaching and Mentoring (IAPCandM). This outlines that they: are accountable, keep accurate records, communicate effectively, honest and trustworthy, deliver exceptional client care, protect the rights of the client, practise safely within the scope of practice, and establish and maintain public trust and confidence within the industry (IAPCandM, 2019). Furthermore, the researcher is also a professional member of the Chartered Institute of Personnel and Development (CIPD). Within the CIPD Code of Professional Conduct, it states that members are required to adhere to four specified standards and behaviours (“obligation”): Professional Competence and Behaviour; Ethical Standards and Integrity; Representative of the Profession, and Stewardship (CIPD, 2019a). The following information is provided in alignment with these standards and as outlined within the research project’s “faculty of Business Application for Ethical Approval of Research” which was approved on 28 June 2016 prior to collection of any data. (please see appendix for approval of application).

Potential risks involve consideration to:

- **the participants and vulnerable groups**

Participants will be employed within an organisation and asked to disclose if they have any pre-existing conditions which would restrict their involvement in the research.

- **the activity they undertake and research involving sensitive topics**

The activities undertaken as part of the research are designed so that they will not cause harm emotionally, physically or mentally. It is possible, that as part of the coaching, participants may reveal emotional symptoms however the coaching will be carried out in accordance with the Professional Standards for the International Authority for Professional Coaching and Mentoring (IAPCandM) and the Chartered Institute of Personnel and Development (CIPD) Code of Professional Conduct and any outcomes of the coaching that represent a threat to the well-being of the participants will be handled in accordance with those policies. Socio-demographic information will be collected e.g. gender will be asked as part of the quantitative survey, but this will only be for background information. Participants will be able to choose not to disclose this information. Participation in the programme will be subject to those who are well enough to attend work.

- **deception or concealment**

Participants will be informed via a briefing document and orally at the start of the programme as to the aims and purpose of the research. There will be no covert aspect to the research.

- **confidentiality, data protection and anonymity**

All data will be treated as strictly confidential and according to the Data Protection Act (as updated under GDPR). Participants will have this outlined in writing as per the consent form and it will be repeated orally at the start of the coaching and data collection. Data will be anonymised unless the participant gives permission otherwise. A report may be made available back to the participating organisation which may only include the information from that organisation. This will be

anonymous but there is the chance if numbers are low, that certain groups of people could be identified. This will also be explained to participants before consent and precautions taken to avoid this where possible. All data collected will be kept in a locked cabinet and password protected on a personal computer. Identifiable information e.g. participant name will be coded during transcription. Access will be restricted to Alison Sydenham and the supervisory team. Data will be held for a minimum of 5yrs for use in the PhD and future publications. Participants will be informed of this in a debriefing document.

- **consent and right to withdraw**

The briefing document will be sent to potential research participants at the point of recruitment. If they decide to go ahead, an attached consent form will then be issued and returned prior to the programme or research stages commencing. This information will be repeated to participants orally at the start of the programme and at the start of any data collection i.e. interview or focus group. The briefing document will also state the contact details of the Ph.D. Supervisor should the participant feel more comfortable asking questions of senior member of the Ph.D. team/University and who can answer official questions regarding University policy. The briefing document will outline the participants right to withdraw. This will be repeated orally at the start of the programme and at the start of the interview/focus group. Should they wish to withdraw, participant's data will be destroyed.

- **communication with participants and debriefing**

Initial contact will be made by the researcher to a point of contact in the organisation and the organisation will be responsible for recruiting and communication directly with the participants. The briefing document will be

supplied to the Organisation to assist the communication process and outline the research process, involvement and key information, including the right to withdraw. Following participation in the programme, participants will be thanked and offered the opportunity to ask any questions. They will then be given an outline of the next steps – how their information is being used, what timescale they can expect any feedback and the opportunity to make contact during this period.

- **the well-being of the participants and researcher**

It is not considered that this form of programme will put participants at any physical or psychological risk, nor will the research take place within a vulnerable section of society. However, as is the nature of coaching, it is likely that a range of emotions could arise during the course of a coaching session. All coaching content will be handled with care, sensitivity and in accordance with the ethical principles of the IAPCandM of which the researcher is a member. Coaching, training and interviews will take place in a location where both the coach/researcher and participant feel comfortable (usually the workplace). The chosen environments will be safely accessible and not constitute lone working. As an added precaution, a copy of the research schedule will be made available to a point of contact prior to the session taking place.

3.9 Data Analysis

There are many ways to approach the analysis of the data and particularly with a mixed methods approach. Straits and Singleton Jr. (2011) suggest that data analysis is the act of comparing theory and data, however before data can be

analysed, it needs to be processed and this can usefully be achieved through assistive technology or manual means of processing.

3.9.1 Quantitative data analysis - SPSS

Jones (2011, p. 206) suggests that when engaging with critical realist inspired quantitative research, it is important to not only choose appropriate techniques for the relevant task, but also to “*play with the data and use exploratory tools of data analysis*”. Through the process of “exploration” and “confirmation” Tukey (1962) suggests that data can be brought into sharper focus which makes visible the patterns and anomalies, subsequently, significance testing can be used to confirm hypotheses and ensure the validity of the data being presented. One of the ways this can be achieved is through computer programmes such as SPSS which will now be outlined.

Data analysis within the Social Sciences hasn't always been as popular as it is today, programmes such as SPSS have become instrumental in the expansion of the use of computerised data analysis and this programme remains the most popular (Acton and Miller, 2009). However, over the past decade, other programmes such as R have increased in popularity and can be considered a major competitor to SPSS due to the flexibility of statistical analysis and “aesthetically appealing data graphics” (Fogarty, 2019, p. 8). SPSS has been chosen as the programme for analysing the quantitative data for this research project because it enables the scoring and analysis of quantitative data efficiently and effectively, providing the opportunity for appropriate statistical testing. This not only saves time but can also helpfully overcome errors associated with

manual calculations. Furthermore, as the researcher is new to statistical packages, SPSS offers a simpler programme to understand and access ways of analysing the data. Further detail about the process of analysis will be discussed in the Findings Chapter.

3.9.2 Qualitative data analysis - NVIVO

The qualitative data can be analysed and interpreted in a number of different ways. This research project aims to understand the causal mechanisms by which changes may take place as well as an in-depth understanding of what those changes may be. Therefore, qualitative data in this instance can complement the quantitative data discussed above and analysis techniques will need to take this into account. Firstly, there are many tools to assist data analysis and an outline of the chosen method will be clarified below.

The chosen tool for undertaking an analysis of the qualitative data is NVIVO. This can improve the efficiency and effectiveness of understanding the data in the following ways: manage data; manage ideas; query data; visualise data; report from the data, and “*allow an increased focus on ways of examining the meaning of what is recorded*” (Bazeley and Jackson, 2013, p. 2). The further benefit of using the software is that it is “method-free” and therefore can support various methodological approaches including the ones suggested as applicable for this research project.

However, there are issues commonly raised by using software for qualitative data analysis, not least of which, novice researchers can unwittingly make mistakes

without realising they have done so (Gilbert, 2002). Bazeley and Jackson (2013) suggest that the common concerns about computerisation on qualitative analysis include:

- Researchers are distanced from their data when using computers;
- Other analytic activities can be excluded in favour of code-and-retrieve methods;
- Analysis may become mechanized, becoming more akin to “positivist” or quantitative approaches’
- A misperception that computers create their own approach to analysis or are restricted to theories such as grounded theory.

In order to overcome the above concerns, the software will be used as an organisational tool to support the analysis (rather than drive it). Specifically, a database of the qualitative data will be set up in NVIVO structured around the research questions, each data source will then be read and re-read, coding as apparent to the relevant research question. As the analysis develops further, new findings or areas of interest will be coded to additional nodes and the search queries performed to ensure new areas are captured across all data sources.

3.9.3 Thematic analysis

The process of analysing qualitative data with the above format lends itself to the utilisation of thematic analysis. Braun and Clarke (2013) argue that thematic analysis offers an accessible, flexible and relatively easy method by which qualitative data can be analysed (particularly within psychology). Braun and Clarke (2013, p. 175) have defined it as a method “*for identifying themes and*

patterns of meaning across a dataset in relation to a research question", although there is no clear agreement about what it is or how it should be undertaken (see Boyatzis, 1998; Tuckett, 2005). They go on to argue that a lot of analysis actually fits the description of thematic analysis without necessarily being called such, it therefore has not had the publicity of other methods e.g. discourse analysis. They also suggest that it can be a "contextualist" method, characterised by theories such as critical realism (e.g. Willig, 1999) and acknowledge "*the ways individuals make meaning of their experience, and, in turn, the ways the broader social context impinges on those meanings, while retaining focus on the material and other limits of 'reality'*" (Braun and Clarke, 2006, p. 81). It therefore poses benefits as a method to both reflect and unpick "reality".

However, the widespread use of thematic analysis does not imply a lack of disadvantages to this approach; the flexibility it offers can misguide the researcher into relying on the process without properly analysing the data and developing themes based on relevant research questions and anchored to a theoretical framework (Braun and Clarke, 2013). Furthermore, they also suggest that the flexibility of this approach doesn't obviously account for continuity and contradictions which may be present within one individual account and relies on the researcher to choose what they consider to be meaningful within the data, it is therefore important that there is an account of what was done and why. It is suggested that the following process will be adopted in the analysis of the qualitative data utilising thematic analysis (Fig. 19).

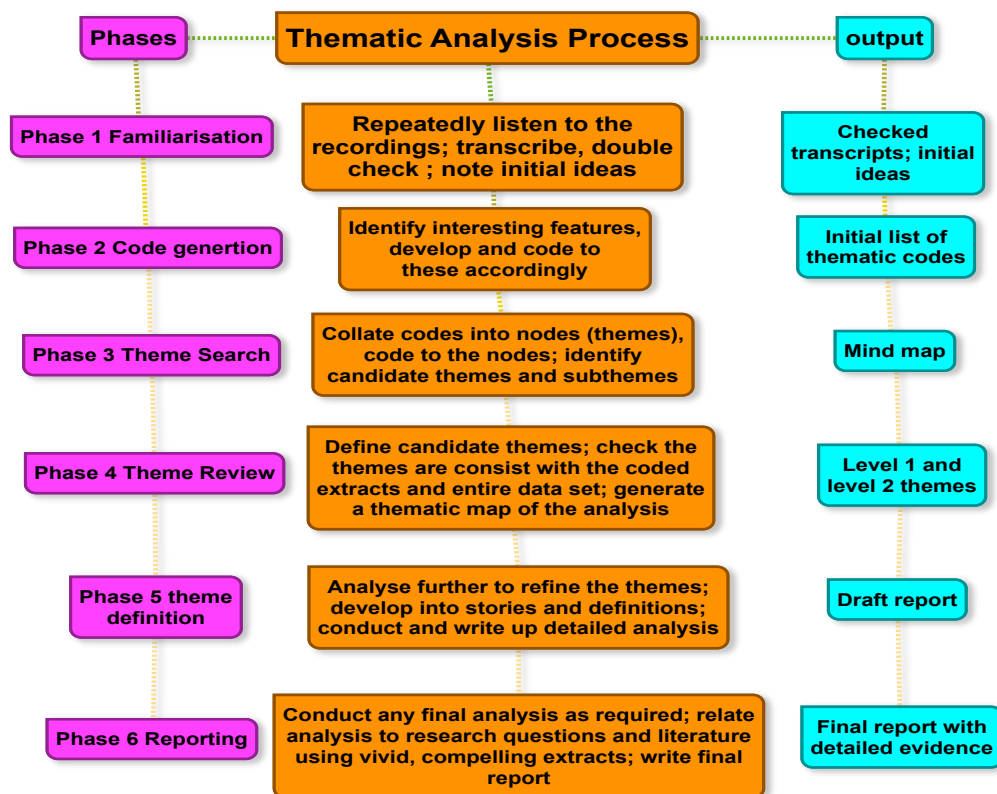


Figure 19: Process of Thematic Analysis (based on Braun and Clarke (2006))

However, within the consideration of mixed-methods, the impact of the pre-existing themes from the National Accounts of Well-being survey do need to be taken into account. Therefore, while an emergent process of identifying themes will be utilised to consider the findings concerning (a) whether well-being has changed and (b) the causal mechanisms of that change, the research question concerning (c) what changes have taken place, will necessitate a further step to map these themes following identification, in reference to the survey. This will enable a closer comparison of the qualitative and quantitative findings.

3.9.4 Analysis of the causal mechanisms

As already mentioned, this research is aiming to (a) understand the participants opinion about changes to their well-being and (b) to explore the causal mechanisms by which those changes may have taken place. The first part will be explored through the techniques suggested above, while the second part can usefully be achieved through retroduction.

3.9.5 Retroduction

Retroduction underpins critical realism and involves considering beyond the level of observation and lived experience to the “deep structures” that account for the phenomena involved (Mingers, 2003). It has been defined by Olsen and Morgan (2004, p. 25) as *“a mode of analysis in which events are studied with respect to what may have, must have, or could have caused them. In short it means asking why events have happened in the way they did”*. This blends with a mixed methods approach because quantitative methods may be used to reliably describe what changes may have taken place in the well-being of participants and qualitative methods e.g. interviews allow themes to emerge during an inquiry to highlight complex concepts that may have been unlikely to have been captured by a quantitative methodology.

3.10 Critical evaluation

This chapter has outlined methodology and associated research design implications. The design is based on a thorough literature search and will be undertaken in collaboration with a partnering organisation. It offers an

opportunity to explore a gap in the literature concerning the impact of coaching on mental well-being and the exploration of what the process of coaching entails which may account for any change to well-being. It uses mixed methods which is unusual in a study of this type, utilises a control group as well as interval questions to explore mitigating factors to the research and is based on a firm understanding of the concept of well-being.

While this programme of study has been undertaken to be thorough and to overcome any potential areas of weakness, it is natural that as a learning process, certain aspects of the design may offer room for improvement. This is predominantly that the participants may bias the results (a) through providing the answers they think the research is looking for i.e. an improvement in well-being, (b) that as coaches, they should be seen to have high levels of well-being, (c) the impact on their work and that they should be seen to improve the well-being of the people they are coaching (Phase 2 coachees), and (d) to show loyalty to the researcher. While all of these areas cannot be overcome, they have been attempted to be mitigated by asking interval questions throughout the process which assess the participant's well-being, as well as exploring the wider impact of well-being (outside of the coaching programme). As already mentioned, there is also a control group who have had no contact with the research study other than completing the well-being survey.

The amount of information being gathered is another area for consideration, and this may dilute the findings. All the information being gathered does not need to be used, the data that is utilised will be scrutinised for validity, relevance and

impact. The design of each of the methods has been observed for relevance to the main research questions.

The question of reliability is an important one and something that has been focused on in the design of this research. Because the research has taken place over six months and with several different research interventions, it was expected that this will contribute towards the reliability of the results. However, not all issues of reliability could be pre-determined. By working with a larger participant base, some aspects of reliability and representativeness will be overcome by establishing a pattern among the results and exploring unexpected outcomes. Furthermore, the research tools are an important aspect in this matter. The National Accounts of Well-being Survey has already been discussed for its reliability, and furthermore, the results gained in this research can be compared to the largest dataset on well-being gained in the European Social Survey for which the National Accounts of Well-being questions formed a part.

If this research were to be repeated, there are some things which may benefit from being undertaken differently. Firstly, the National Accounts of Well-being Survey is long and demanding on the participants' time, it is possible that another survey such as the Warwick Edinburgh Mental Well-being Scale may prove more useful and reliable due to its credibility as a strong performing survey.

Secondly, it is very difficult to mitigate all factors within the research. Participants are likely to have other factors impacting on their well-being such as the time of

year, personal and work aspects. These can be clarified throughout the research process and reflected in the discussion within the results.

Finally, participant recruitment is a challenge and this study is no different to any other in this respect, except that the participants will be required to commit to attending the programme over a 6-month period. The participants within this study will be self-selected and this incurs its own challenges in terms of the type of person who is likely to self-select. For instance, participants may have lower levels of well-being as they are attracted by the idea of making improvements. Additionally, the influence of coaching within the programme may attract people who are interested in self-development or who think positively about the benefits of well-being (and indeed the nature of the “coaches” group all working as coaches within the organisation are likely to be more favourable to the concept of coaching). Therefore, the results of this study may be biased and only be representative of a small sample of the population and therefore a larger scale questionnaire may prove useful for future research to generalise more widely. A shorter study may also prove easier to recruit further participants thus improving the research numbers and representativeness. Additionally, there are advantages to working with a specific participant group, for example it enables detailed understanding of their experiences which adds depth to the research.

3.11 Conclusion to methodology

This chapter has analysed different methodologies and their relation to methods of data collection within the context of the paradigms of inquiry. It has discussed the prevalence of quantitative research methods within the existing literature and

that there is an opportunity to develop the field of coaching research through mixed methods to explore the causal mechanisms of how and why coaching may impact upon mental well-being; this information has then been applied to this specific research project. It is likely that different researchers would choose different methodologies and methods however, based upon the research area and skills of the researcher, it is felt that the areas discussed throughout the chapter are appropriate in order to gain rich data and insight into the nature of well-being among a populations of working adults.

The philosophical position for the topic of research can have a great bearing on the outcome and direction of the research, it is important that this is clarified as early in the research process as possible in order to assist the research to achieve clear direction and validity. The chosen philosophical position for this research is critical realism and this has been related to the paradigm of inquiry underpinned by the ontology, epistemology, methodology, and methods. This framework has assisted and guided the research project because it enables analysis of the link between what is experienced both inside and outside the awareness and knowledge of the participants with the benefit of being able to include inferences from the data. It is believed that by adopting the approach discussed, this will assist and guide the research to the achieved outcome, providing an insightful research process and relevant findings.

Chapter 4 - Findings

“Each individual is master of his or her destiny: it is up to each person to create the causes of happiness”
(The 14th Dalai Lama)

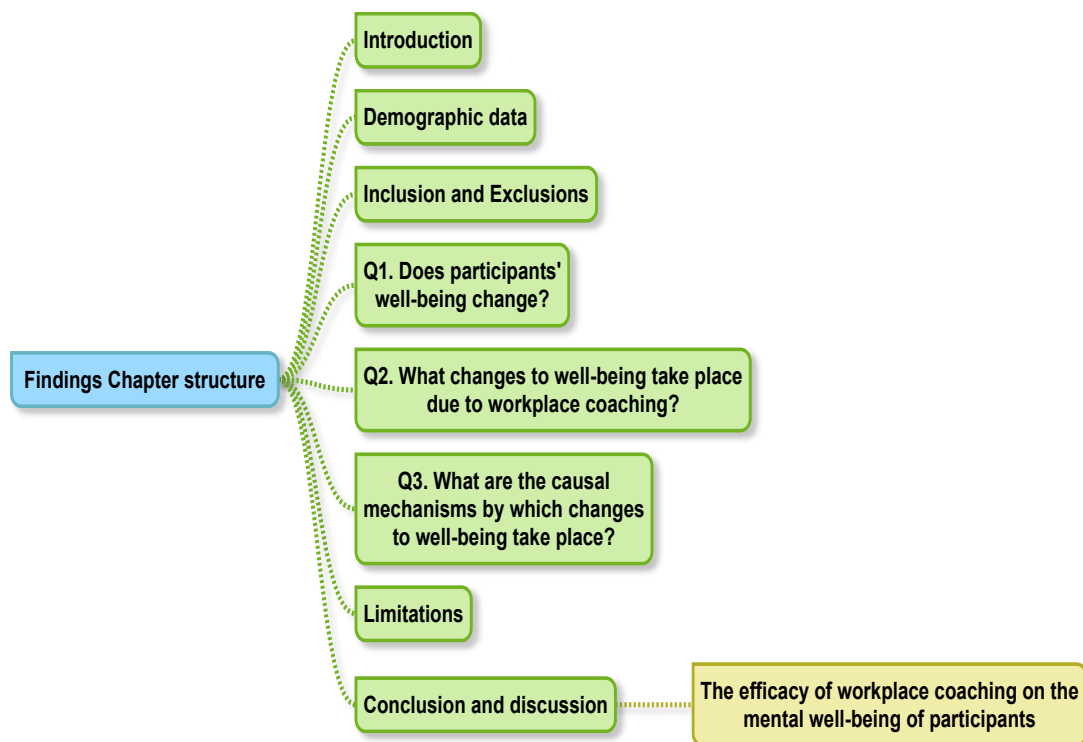


Figure 20: Mind map overview of the content of the chapter

4.0 Introduction

This research set out to consider through mixed methods, whether coaching has had an impact on the mental well-being of participants, along with understanding the processes and causal mechanisms by which any change takes place. The research took place over three phases with different groups of participants. The first phase included 18 employees of a local authority who were qualified as coaches volunteering within the organisations' internal coaching team. One participant withdrew leaving a final number of 17 participants in the first phase (herein referred to as "coaches"). The coaches took part in a six-month coaching programme (between November and April 2018) which involved a two-day training course to educate in central aspects of coaching and well-being theory and exercises. They also engaged in 3 x 1.5hr co-coaching sessions on a monthly basis and took part in a blended learning, self-study course focusing on the topic of well-being.

Participants who expressed an interest in joining the participant group but who were subsequently unable to attend, were invited to be part of the control group for the research. 8 people volunteered who were also qualified as coaches volunteering within the organisations' internal coaching team (the same as the "coaches" group above). This group of participants (herein referred to as "control") completed the well-being questionnaire at the start and completion of the programme (receiving their results at the conclusion of the programme once all research data was gathered). They received no other form of research intervention.

The second phase of the research involved the coaches from phase 1 recruiting people within the same organisation to take part in a minimum of 3 x 1.5hr coaching sessions, the sessions were advertised as “well-being coaching” and were arranged at a mutually convenient times during the 6-month research period. 20 participants were recruited (herein referred to as “internal coachees”), 3 withdrew leaving a final number of 17 internal coachees who received coaching and a report of their well-being score but no other form of intervention.

The final phase of the research involved an external (professional) coach (the researcher) who undertook professional coaching sessions with 5 participants who were employees of a variety of local organisations (herein referred to as “external coachees”). They were provided with coaching through Access to Work due to being diagnosed with a neurodiverse condition and undertook a minimum of 3 x 2hr coaching sessions with the professional coach, they also undertook no other form of intervention.

This chapter will outline the main qualitative and quantitative findings from the data gathered from interviews (n=30), 1 focus group (n=14), surveys (n=47 x 2 - taken at the start of the research (T1) and repeated post-intervention (T2)), and mixed-methods questionnaires taken throughout the research programme. The findings will be relayed in terms of the three research questions:

1. *Does participants well-being change?*
2. *What changes take place due to the coaching?*
3. *What are the causal mechanisms by which changes to well-being take place?*

In the final section conclusions are made and these will be discussed in the following chapter.

In order to retain confidentiality, participants have been coded according to the group they were in, including:

- “focus group” refers to the “coaches” that took part in the focus group;
- “COA1; COA2...” refers to an individual “coach” along with a randomly generated number;
- “CEE1, CEE2...” refers to an internal or external “coachee” along with a randomly generated number.

The interview questions and focus group questions were predominantly focused around the participant’s (coach or coachee) experience of being coached. The direct quotes should be taken as the participants experience of being coached unless the corresponding text states that it was the coaches opinion about the impact on the person they coached or, occasionally where explicitly stated, it refers to the coaches opinion about the efficacy and causal mechanisms of workplace coaching.

4.1 Demographic data

There was a total of 51 (White, British) participants who took part in the research, 4 participants withdrew resulting in a final set of 47 participants, these were categorised as follows (Table 8). The table below relates to the demographic data for all participants (including control).

TOTAL PARTICIPANTS (51)	Participant group (n=39)	Control group (n=8)
Category		
<i>Coaches</i>	18 (1 withdrawn)	
<i>Internal coachees</i>	20 (3 withdrawn)	
<i>External coachees</i>	5	
<i>Control</i>		8
Gender		
<i>Male</i>	4	1
<i>Female</i>	35	7
Age		
<i>26-35</i>	6	1
<i>36-45</i>	10	4
<i>46-55</i>	17	3
<i>56-65</i>	4	8
<i>65+</i>	2	0
Hours worked		
<i>Full time (31+hours)</i>	28	4
<i>Part time (30hrs or less)</i>	11	4
Job title		
<i>Manager</i>	19	6
<i>Employee</i>	20	4
Received coaching previously		
<i>Yes</i>	12	3
<i>No</i>	27	5
Working/volunteering as a coach		
<i>Yes</i>	17	8
<i>No</i>	22	0
How long have you been working as a coach?		
<i>0-2yrs</i>	13	6
<i>2+yrs</i>	4	2

Table 8: Overview of demographic data

The participants were of working age, predominantly aged between 36-55yrs and female (n=42 female; 5 male). Demographics were recorded for their salary, working hours and managerial level, demonstrating that the vast majority of participants worked 31-40hrs, with a fairly even split across management/employee positions. Finally, due to the nature of the category split of participants, they were also asked whether they had received coaching previously, were working or volunteering as a coach and if they were a coach, how long they had been a coach.

It is important to note here some particular distinctions between the participant groups. The first phase of the research utilised coaches who were all working or volunteering as a coach, they took part in coaching and training as part of a “coaching for well-being programme”. The second and third phase utilised coachees (internal and external), none of whom were coaches, they took part in a coaching only intervention. The control group were all coaches volunteering or working as a coach within the same organisation as the first phase participants. This means that while the research is interested in the impact of “workplace coaching”, the consideration of the training aspect for the coaches also needs to be taken into account in terms of benefits to the research as well as mitigating factors. Furthermore, the results of the control group and generalisation to the results of the overall research need to be considered cautiously as they are not entirely neutral. However, upon presentation of the volunteers for the research, the imbalance of participants were taken into account by asking additional questions at the beginning and end of the research that clarified some further details, for instance, whether they were a coach, whether they had undertaken

coaching and if they had, how many sessions they had taken part in. The findings of this demonstrated that from the control group, unusually, there was an equal split with half the participants recording that they had never received coaching, stating that they had less than 2yrs experience as a coach and had undertaken between 1-20hrs practice as a coach (coaching tends to be undertaken during training so their answers to this question imply that they are very early on in the training or that the question was assumed to apply outside of their training). During the research period, only two control participants had received coaching, of these one improved their well-being score considerably and the other had a minor decrease in score. Further to this, it needs to be acknowledged that as coaches, the control group may have been more aware of the techniques of coaching and could be undertaking self-coaching, this was unfortunately not investigated within the survey questions and will be discussed as a limitation in section 6.4. Finally, this research design is underpinned by a critical realist approach which implies that real life is part of the research and the circumstantial split of the participants furthermore reflects this reality.

The split between coaches and coachees (internal and external) represents a fairly even split (44% Coaches to 56% Coachees), although there is a strong bias towards female participants aged between 36-55yrs. These demographics will obviously impact of the generalisation of the results. The data that has been gathered is useful to relate to changes in well-being across a Public Sector organisation. It is also the first study of this type to research both coaches and coachees and the subsequent effect on well-being. It is therefore hoped that the

findings will make a contribution that reflects the impact on these participant groups and spanning different base-well-being scores.

4.2 Inclusions and Exclusions from the data

The mixed methods research entailed several different elements of data gathering, including:

- semi-structured Interviews (coaches (17); internal coachees (8), external coachees (5));
- focus group (undertaken solely within this coaches research programme, thus consisting of (14) coaches);
- quantitative survey (all participants at the start and end of the intervention – 47 x 2)
- mixed methods questionnaires at the beginning of the intervention and then pre and post each coaching session (coaches only). This asked a number of questions to assist the coaching process, for example what is your goal for the coaching session? What progress have you made since the last coaching session?

For the purpose of the analysis of the mixed methods questionnaires, the qualitative results were excluded from any analysis and only the quantitative answers were included, which was limited to the following question “*On a scale of 0-10 where 10 means you have complete mental well-being and 0 means you have none, where are you on that scale now?*” The reason for this exclusion is predominantly due to the amount of data that had already been collected from the coaches via the survey; it was felt that this was sufficient, and the remaining

data could be utilised for future research. Furthermore, it is common practice within coaching to ask for some information to be provided in advance of a coaching session, this therefore enabled the coach and coachee to prepare for each session. Finally, the answers provided were focused around personal and professional goals rather than the outcomes of the research, which again encourages the relevance of these findings towards future rather than present research outcomes.

The analysis of the qualitative data was carried out using NVIVO v11.4.3 and coded to research questions initially and then into the emerging themes according to thematic analysis. After the initial themes were gathered, the findings were coded to these accordingly and emergent themes were then noted and searched individually and incorporated into the overall finding. The quantitative analysis was undertaken using SPSS Statistics version 24 and where appropriate Microsoft Excel v16.16.2.

4.3 Does participant's well-being change?

The first area that is to be considered in the results is whether the well-being score changed from Time 1 to Time 2 (T1-T2) and whether this was different for the participant groups compared to the control group. This has been explored through both descriptive and statistical tests. There was homogeneity of variance between the intervention group i.e. coaches, internal coachees and external coachees ($p > .05$). The findings have therefore been recorded as “participant” or “control” for the statistical tests and only separated where there were results of specific enquiry.

4.3.1 Descriptive Statistics

To start with, the “Coaches” only were asked the question: “On a scale of 0-10 where 10 means you have complete mental well-being in your life and 0 means you have none, where are you on that scale now?”. This question was repeated at several time points over the 6-month coaching intervention (T1-T8) and gave the following average results:

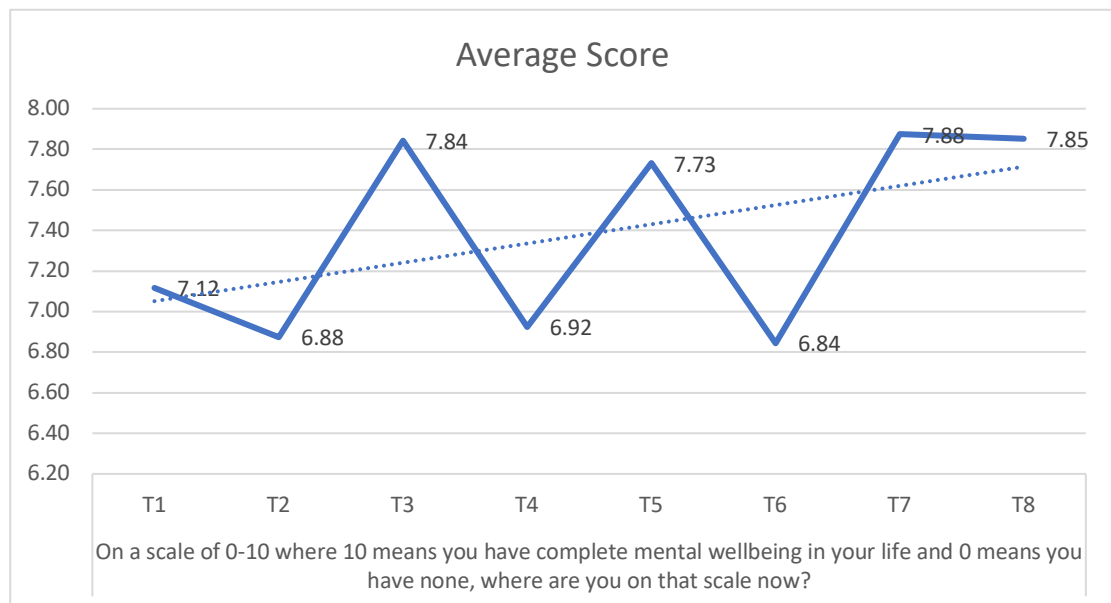


Figure 21: Average well-being score (coaches)

Although the above demonstrates a spiky profile, there are some interesting points to note: there is a general increase from the score at the start of the coaching programme (7.12/10) compared to the score at the end of the coaching programme (7.85/10). T2, T4 and T6 were all taken at the start of each of the co-coaching sessions and T3, T5 and T7 were all taken immediately after the co-coaching session. Therefore, it can be seen that the coaches well-being increased during the coaching session (1.5hrs duration) and this is replicated across each of the three co-coaching sessions. What can also be seen is that it dropped back down to a similar level in the period during the coaching sessions (1 month apart). T8 is particularly interesting because the score was taken at the

start of the research interview which was approximately one month after the end of the coaching programme. This demonstrates a sustained improvement in the well-being score at the end of the coaching, however, it could also be due to other factors which will be discussed in the next chapter.

Furthermore, the coaches were also asked at the start and end of the coaching programme, their scores according to several subjective aspects of well-being, this also demonstrated an improvement over the course of the programme across all areas:

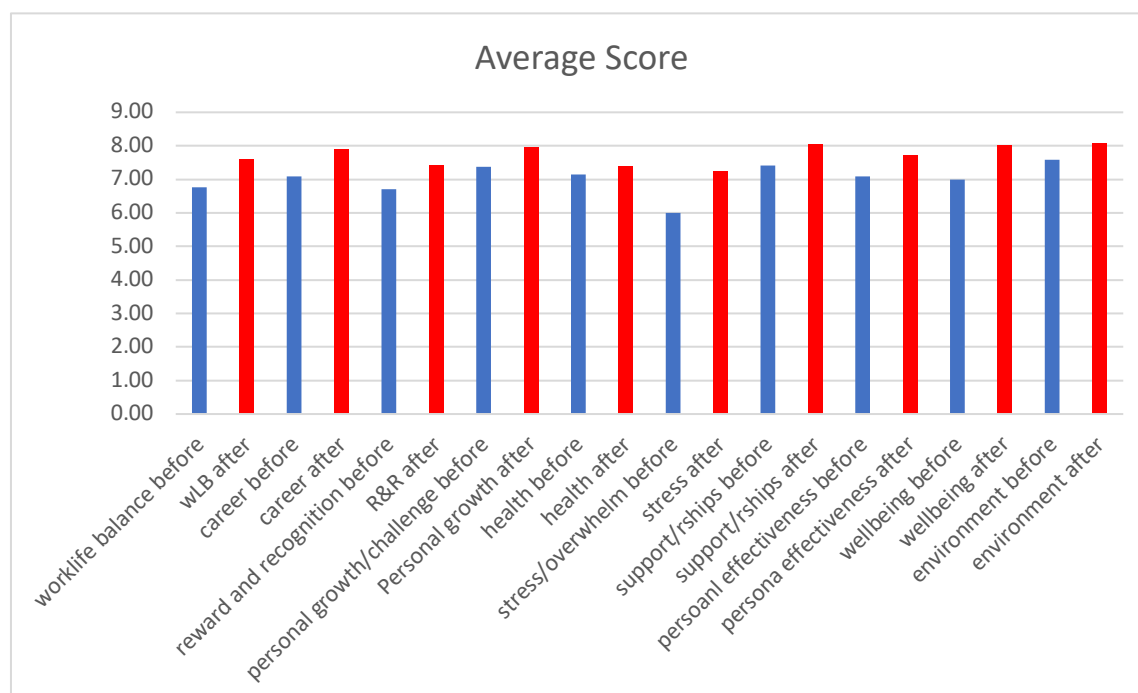


Figure 22: Average coaching score taken before and after the coaching programme

4.3.2 National Accounts of Well-being Statistics

As discussed, participants were asked to complete the National Accounts of Well-being Survey which contains 48 questions along with a few additional demographic questions. The results of the survey were analysed and a transformed score created (see appendix for an outline of this calculation). This

score has been used to outline the T1 and T2 scores and the difference between these scores has been used as the basis for the statistical tests. Figure 23 outlines the total mean score for participants at T1 (blue line) and again at T2 (red line). This demonstrates that overall (excluding control), all well-being scores across all areas were greater at T2 compared to T1.

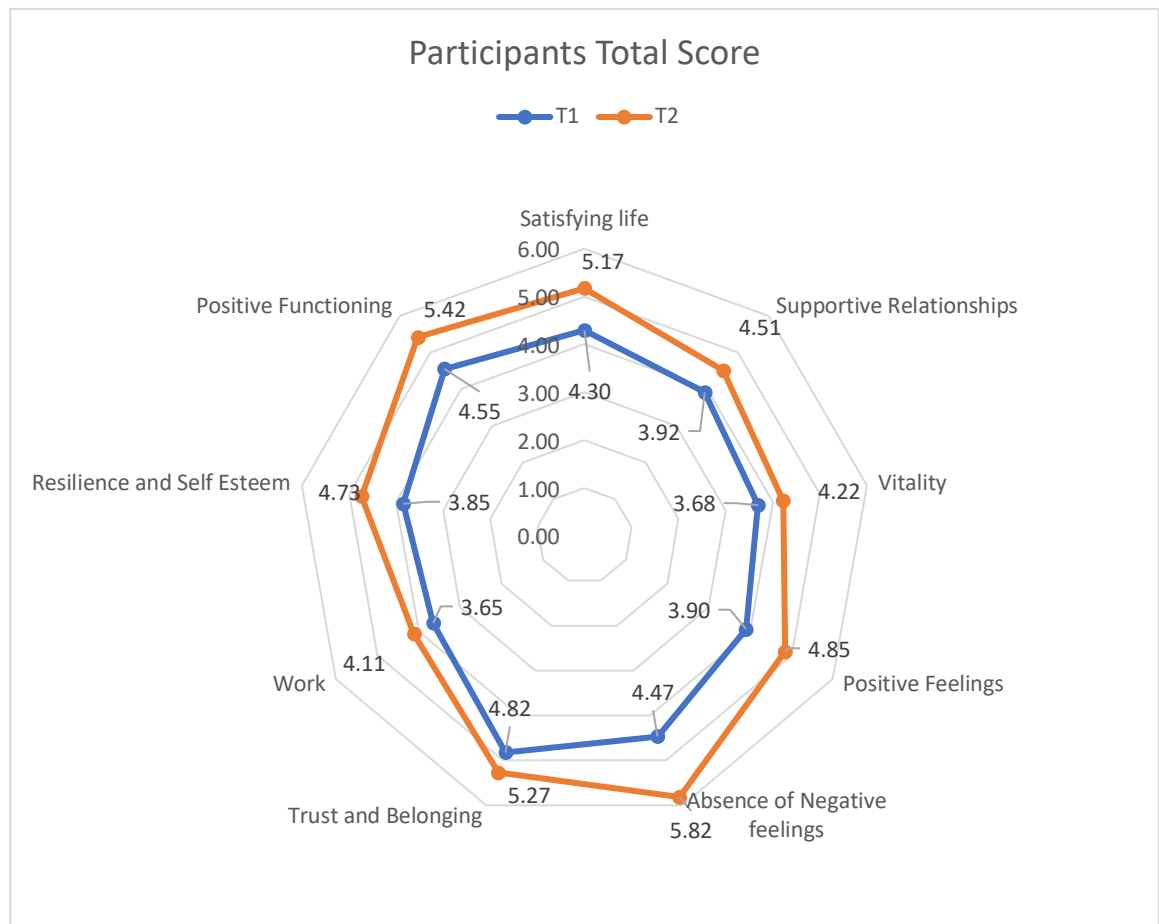


Figure 23: Total mean well-being score before and after coaching (all participants)

4.3.3 Is there a significant difference between the control group and participant groups?

The next research area of interest is whether, having seen above that the T2 score was greater than the T1 score, whether this is true across all participant

groups and especially, whether it was true for the coaching group compared to the control. The following chart demonstrates the immediate difference between the participants and control groups and this has been broken down into further detail including the different categories of participant and components of well-being. As can be seen, the participant group demonstrate an increase in their well-being score, whereas the control group demonstrate an overall decrease in their well-being score:

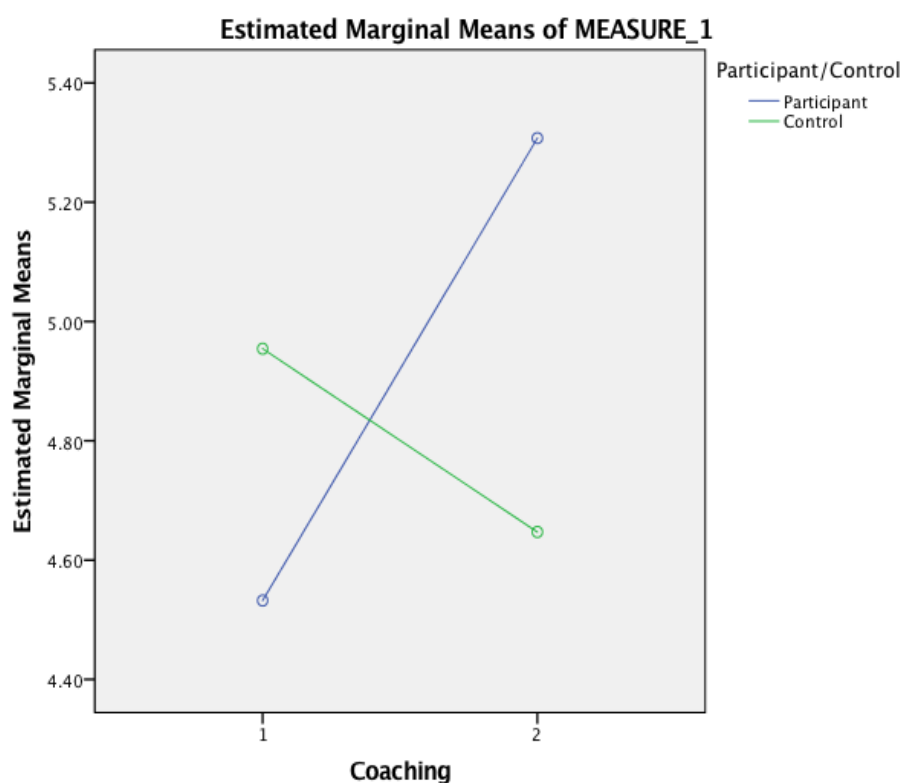


Figure 24: Well-being score participant vs control before and after coaching

Figure 25 plots the total mean score for all participants according to the 4 groups: control; external coachees; coaches and internal coachees. This demonstrates that there was a positive change in well-being score for all groups except the control group which decreased from T1 – T2.

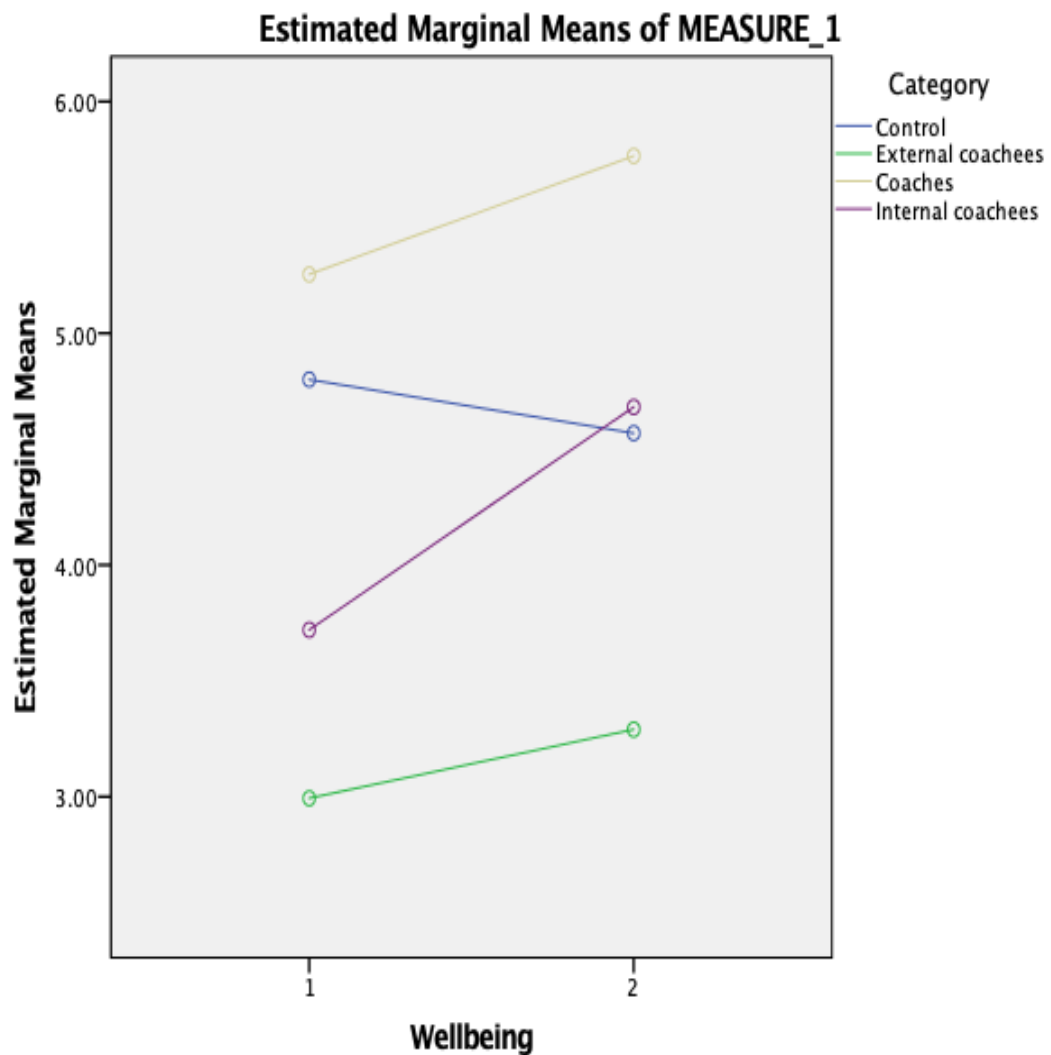


Figure 25: Total well-being score for each participant category before and after coaching

As has been demonstrated, participants' well-being changed over the course of the coaching programme; well-being represented across all participant categories improved and overall control well-being scores decreased. There was homogeneity of variance (using Levene's test of homogeneity of variance) across the independent variables (participant groups, $p > .05$) and therefore the combined participant groups were tested for the significance of this result and a one-way Anova test demonstrated a significant score ($p > .005$). Therefore, initial conclusions related to whether coaching improved participants' well-being can be

made to be favourable. The question is then whether the result can be accountable to the impact of the coaching (noting that the coach participants received coaching and training). The demonstration of the improvement to the coachees group compared to the decrease in the control score help to reinforce the findings that it was the coaching that made an impact (although this may have been further impacted positively/negatively by the training).

4.4. What changes to well-being take place due to workplace coaching?

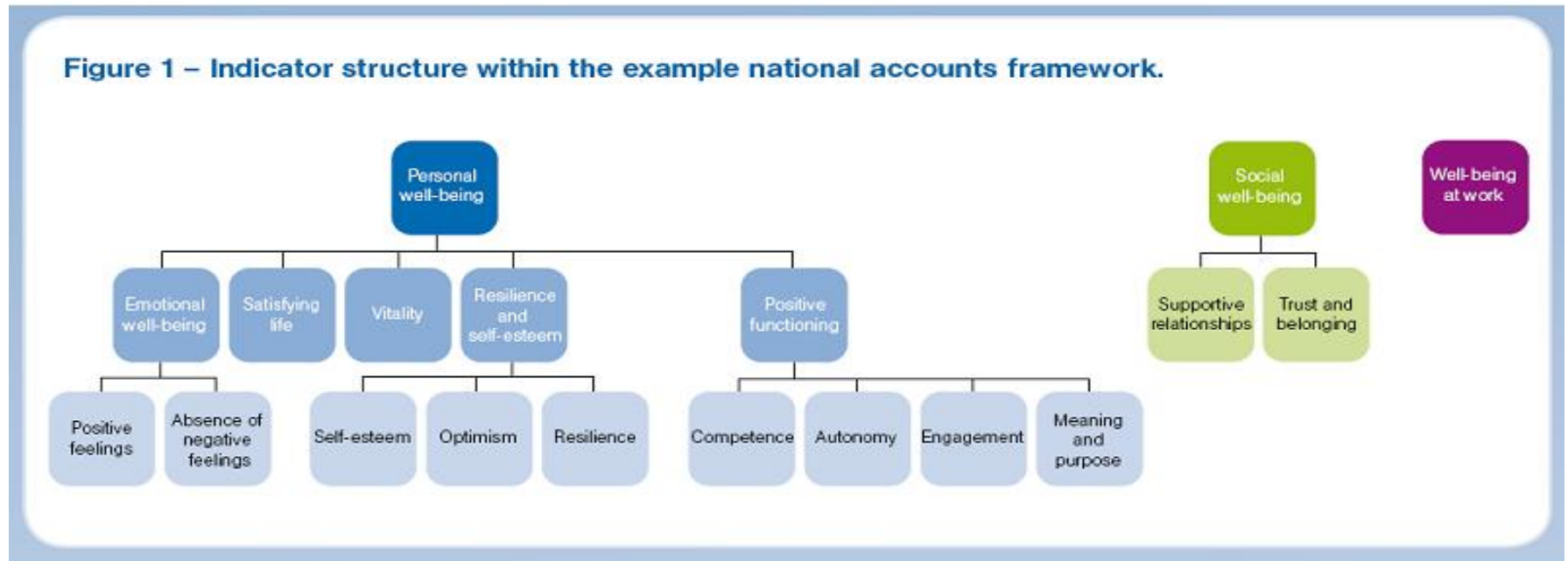


Figure 26: National Accounts of Well-being Framework

4.4.1 Overview of changes to well-being

There were many changes that took place to the well-being of participants, some were identified quantitatively through the well-being survey (National Accounts of Well-being Survey, see Fig. 26) and others through the interviews and focus group. There is some overlap between these two sets of results and therefore an overview of the headline indicators (personal well-being; social well-being and well-being at work) and then each of the subcomponents will be discussed in light of tests of significance.

Having seen that overall well-being scores improved for the participant groups, Figures 27-29 below demonstrates that the participant group improved their personal, social and well-being at work scores and the control group demonstrated an increase in their social well-being but a decrease in their personal well-being and well-being at work. It can also be seen that the control group had a visibly higher score at T1 for personal and social well-being. This difference is explored further in the results section where the scores for coaches and non-coaches are demonstrated.

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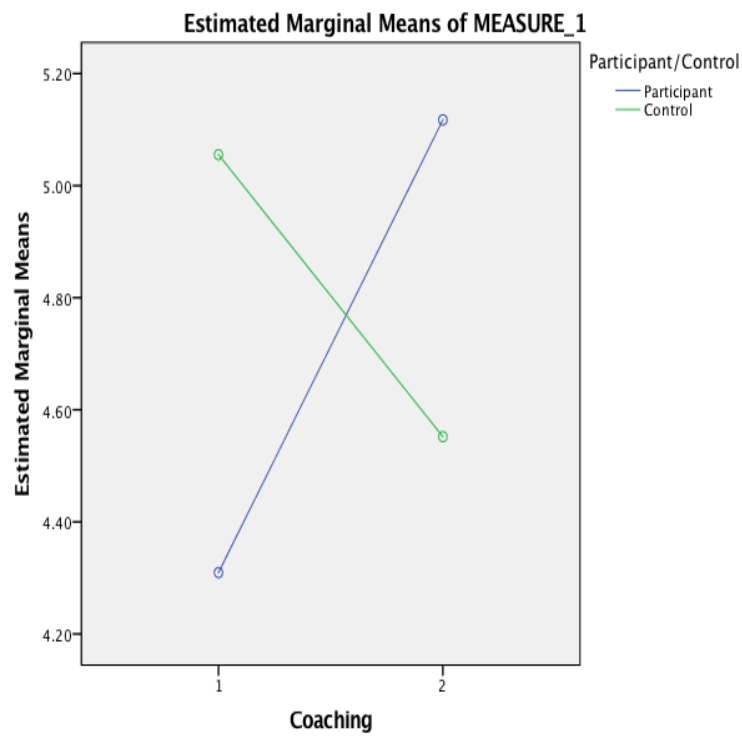


Figure 27: Personal Well-being Score participants vs control before and after coaching

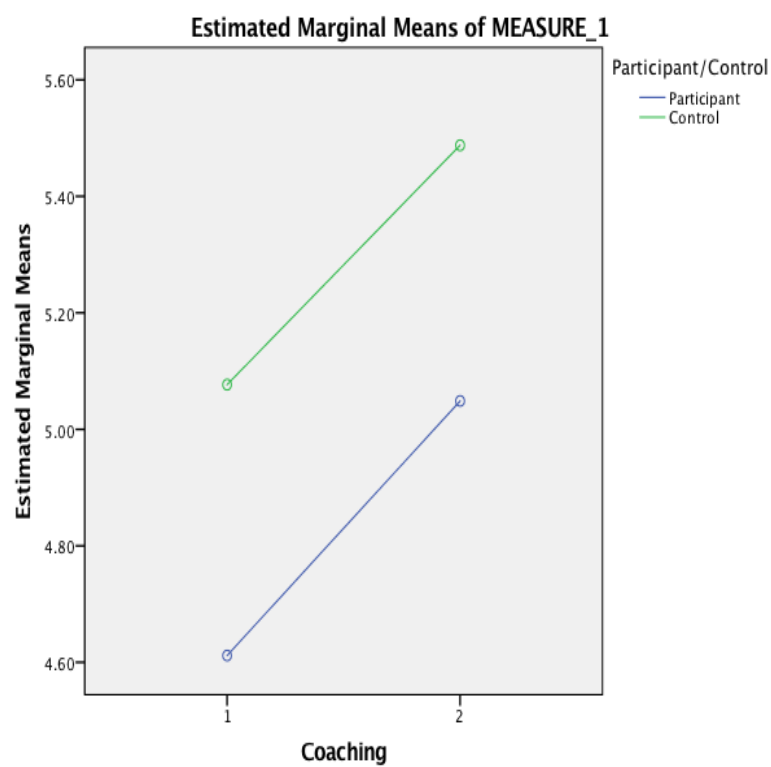


Figure 28: Social Well-being score participants vs control before and after coaching

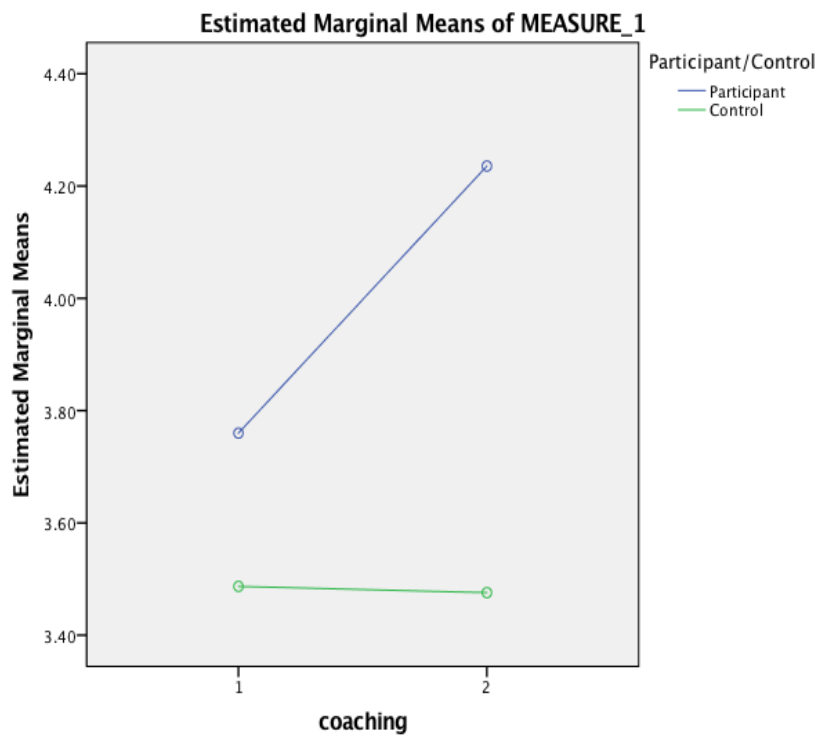


Figure 29: Well-being at work score participants vs control before and after coaching

Figures 30-31 split the results according to the participants/control and all component and subcomponent measures, this enables the analysis of what changes take place to well-being. As before, the Control group demonstrates decreases across most areas from T1 to T2 and the Participant group demonstrate increases.

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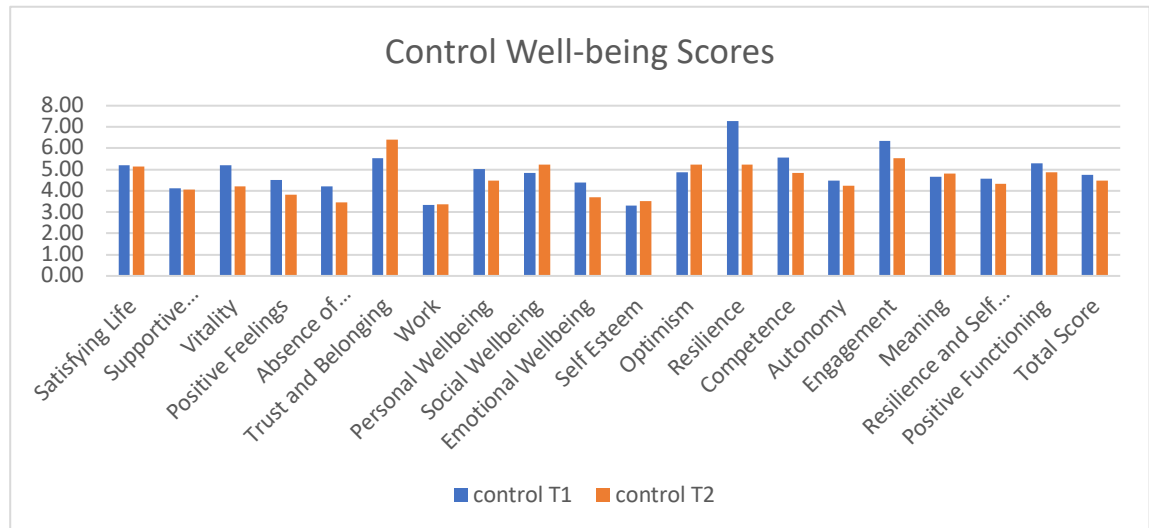


Figure 30: Control well-being score (all areas) at the start and end of the research programme

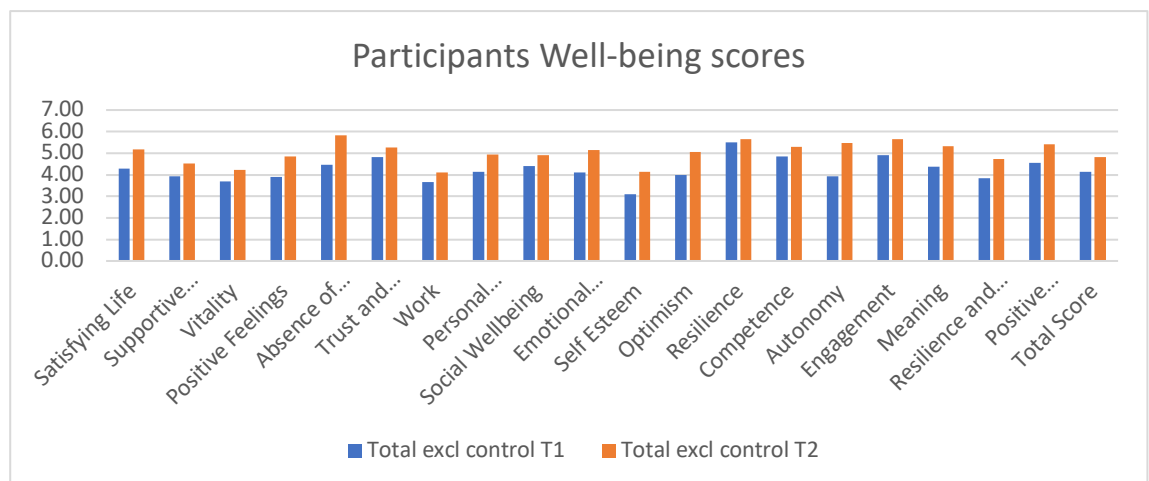


Figure 31: Participants well-being score (all areas) before and after coaching

4.4.2 Are the results significant?

Parametric tests

A one-way Anova test was used to test whether participant well-being scores changed from T1 – T2, this passed the assumptions tests for some of the well-being scores, however some significant outliers were noted which may have impacted the results; these have been overcome by running non-parametric tests where relevant. The dependent variable (well-being score) was normally distributed across the participant group/control according to the Shapiro-Wilk test of normality ($p > .05$) and the Levene's test for homogeneity of variance:

Well-being Category	Shapiro-Wilk test of normality	Levene's test for homogeneity	Significance One-way Anova	Kruskal-wallis H-test (non-parametric)
Total Well-being Score;	Yes	Yes	.005	
Satisfying life	Yes	Yes	.063	
Supportive Relationships;	Yes	Yes	.170	
Vitality	No (Control .030)	Yes		.024 reject null hypothesis
Positive feelings	No (Participant .029)	Yes		.016 reject null hypothesis
Absence of negative feelings	No (Participant .002)	Yes		.077

Table 9: Test of Assumptions for parametric tests

Table 9 demonstrates that the mean difference in score of the participants was greater compared to the control group) from T1 – T2 for the following measures as highlighted above: *Total Well-being Score, vitality, positive feelings, resilience and self-esteem, positive functioning, emotional well-being, resilience, autonomy, engagement and personal well-being.*

While there was an improvement in the well-being score for the participants (and a decrease in the score for the control group), this was not found to be significant for the following measures: *satisfying life, supportive relationships, absence of negative feelings, competence.*

The following areas demonstrated an improvement for both the participant and control groups, however again, this was not found to be significant across the following measures: *trust and belonging, work, social well-being, self-esteem, optimism, and meaning.*

Taking these findings into consideration, initial conclusions can be made that the coaching/coaching programme had a significant positive impact on participants' well-being overall and specifically their *vitality, positive feelings, resilience and self-esteem, positive functioning, emotional well-being, resilience, autonomy, engagement and personal well-being.* This is reflected visually by highlighting (in green) in Figure 32 where the results demonstrated significant improvements compared to the control group:

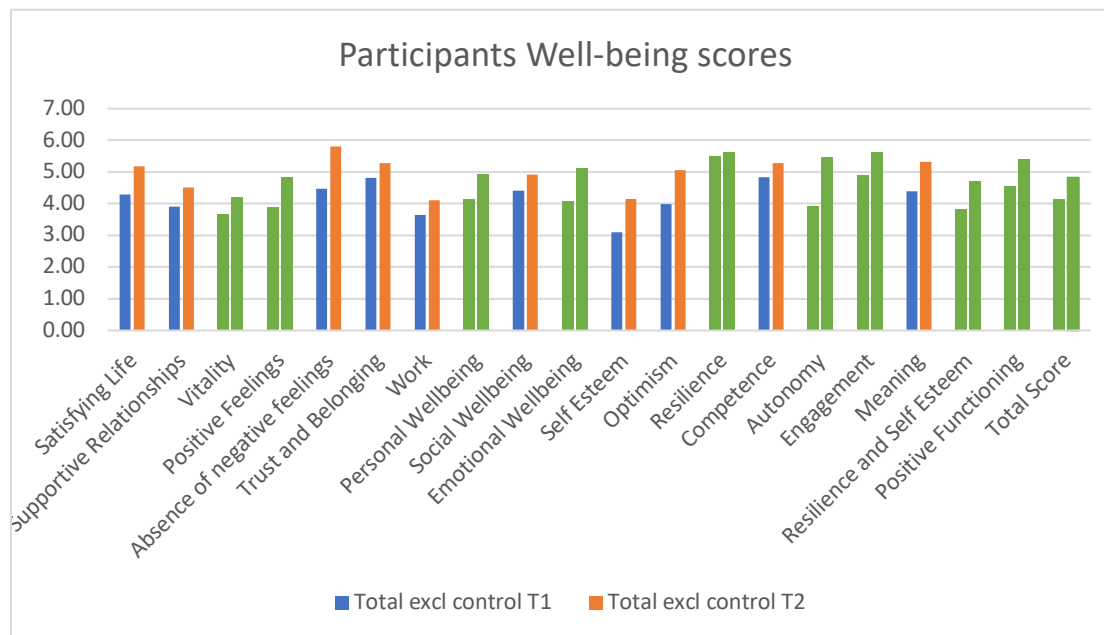


Figure 32: Participants' well-being scores (summary of significant changes)

4.4.3 A comparison of the results for Coaches compared to Non-Coaches

One particularly interesting result is that the coaches well-being score was particularly high at the start of the coaching (Fig. 33):

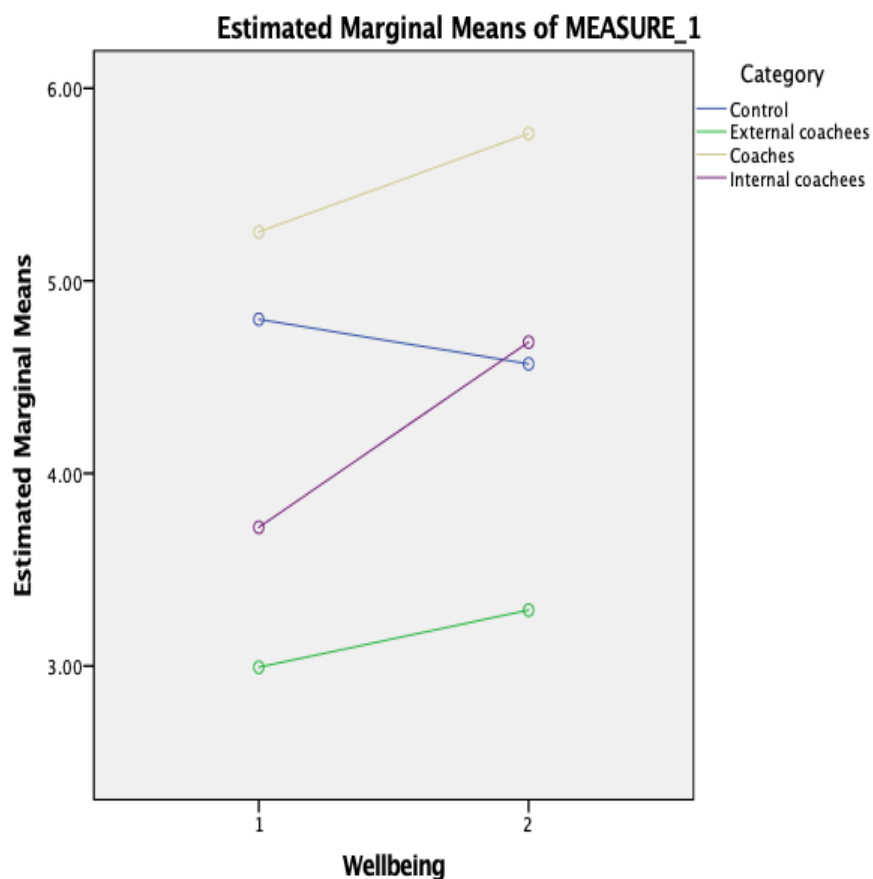


Figure 33: Total well-being score for each participant category before and after coaching (repeated figure)

Unusually, the control group also all happened to be coaches and while the control group demonstrated a general decrease over the research period, their score was among the highest overall at the start of the research. The Anova results were therefore re-run according to two groups:

Coaches and non-coaches (this also passed the Levene test of homogeneity of variance).

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Well-being Category	Shapiro-Wilk test of normality	Levene's test	Significance One-way Anova	Kruskal-wallis H-test (non-parametric)
Total score	Yes	Yes	.030	
Satisfying Life	Yes	Yes	.010	
Supportive Relationship	Yes	Yes	.282	
Vitality	Yes	Yes	.062	
Positive feelings	No, non-coach .033	Yes		.300
Absence of negative feeling	No: coach .008; non-coach.057	Yes		.583
Trust and belonging	Yes	Yes	.206	
Work	Yes	Yes	.473	
Resilience and self-esteem	Yes	Yes	.084	
Positive Functioning	No: non-coach.015	Yes		.159
Emotional Well-Being	Yes (.047)	Yes	.131	
Self Esteem	Yes	Yes	.157	
Optimism	No: .001/.000	Yes		.607
Resilience	No: .007/.004	Yes		.303
Competence	Yes	Yes	.972	
Autonomy	Yes	Yes	.243	
Engagement	Yes	Yes	.027	
Meaning	No: coach.018	Yes		.313
Social Well-Being	Yes	Yes	.090	
Personal Well-Being	Yes	Yes	.014	

Table 10: Test of assumptions for parametric tests (coaches vs non-coaches)

Table 10 demonstrates that, when comparing the well-being score for coaches to non-coaches, the non-coaches demonstrate a significantly greater improvement to the well-being score overall and for *satisfying life, engagement and personal well-being in particular*. The relevance of these results will be discussed in the next chapter however, at this stage, it implies that the attributes of being a coach might have a positive impact on well-being. Furthermore, that perhaps the process of coaching offers benefits to well-being that are sustained as part of the role of the coach (that the coach had already improved their well-being through training as a coach or that they were “self-coaching”) which would explain the greater improvements to well-being as specific to the non-coaches and not to the coaches.

4.4.4 Quantitative Results Summary and Conclusion

This first part of this Chapter has outlined the quantitative results which have been analysed using SPSS parametric and non-parametric tests. The results have demonstrated that overall, the participants' well-being score was statistically significant compared to the control group. The results have also outlined some of the areas which were particularly impacted (*total well-being score, vitality, positive feelings, resilience and self-esteem, positive functioning, emotional well-being, resilience, autonomy, engagement and personal well-being*), along with the difference between the groups of participants both those who took part in the research programme and coaches compared to non-coaches.

Initial conclusions can be made that, in accordance with previous findings, participation in coaching has positive outcomes for well-being overall and in

particular across the areas mentioned above. What is pertinent about these findings is that the significant findings all sit within the category of “*personal well-being*” and it therefore has to be concluded that coaching has a greater impact on personal well-being than on social well-being or indeed well-being at work. This is perhaps unsurprising based on the person-centred approach to coaching. In addition to this, coaching appears not to have had a positive impact on satisfying life, which is surprising as it is contradictory to previous research demonstrating positive outcomes measured according to the satisfaction with life scale, furthermore, there is said to be a strong correlation between satisfaction with life and goal attainment, which is a key component of coaching models. The reason for this may be the focus of the coaching being on mental well-being (and not life satisfaction), or it could also be that factors that affect judgments as to whether life is considered satisfying such as work situation; physical health; environment (as were suggested in the qualitative interviews undertaken), are outside of the control of the coachee and were not necessarily resolved within the timescales for the research. These findings will be explored further in the next section of this chapter which will outline the qualitative results in order to provide an opportunity to discuss, in chapter 5, whether there is any commonality between the findings and furthermore, whether this correlates to the existing literature.

4.5 Participant perceived changes due to workplace coaching?



Figure 34: Mind map of the findings related to changes to well-being due to the coaching

4.5.1 Overview

This section highlights the qualitative results that indicate what participants considered were the changes to their well-being (prior to receiving their survey results demonstrating whether it had actually changed). The results are outlined in terms of general feedback about well-being and then more specific changes relating to the components of the National Accounts of Well-being. These findings were gathered from the focus group (coaches only) and semi-structured interviews which were carried out with 17 coaches and 13 internal and external coachees (the data from the internal and external coachees have been combined and will herein be referred to as “coachees”). It can be seen that a variety of direct quotes have been taken from both the coaches and coachees interviews, these have been organised according to the thematic analysis discussed in the methodology chapter. Therefore, while the views of both the coaches and coachees have been relayed, there may not be an equal split between the two groups, more importantly it was felt that the theme needed to be suitably analysed in preference to the difference in opinion between the two groups. Where there were distinct differences in the findings between the participants, these have been outlined.

4.5.2 General changes to well-being

It was reported by the majority of participants that they felt their well-being had gone up, with just a few suggesting that there hadn't been any changes. The coachees predominantly felt that their well-being had gone up (regardless of whether this was an identified goal from the coaching). The Coaches however, had different results; although the majority of the coaches reported that their well-

being would have increased over the course of the coaching programme, several of them felt that their well-being wasn't that low to start with and therefore, that their well-being had either stayed the same or raised very slightly. Interestingly, several of the participants had been through major situations that impacted their well-being (such as bereavement or severe illness), naturally they felt this had an impact on their well-being: *"I think it is because of the time I was having the coaching and going through this programme, it was a very unusual time in my life, the timing was perfect for me and it had a big impact on how I coped with everything"* (COA16).

4.5.3 Specific changes due to the coaching

Participants were asked both in the focus group (coaches only) and the semi-structured interviews (coaches and coachees) what changes they considered had taken place to their well-being and whether these were due to the coaching. The interview was designed to remain open so as to create space for findings which were not pre-conceived, however in addition to this, participants were specifically asked about feedback on the elements of the survey results and whether there had been any changes as to how they manage their own mental well-being following the coaching. This was asked in order to consider changes in behaviour as well as general perceived changes to well-being. The findings below relate to what participants reported for these aspects and which have been organised according to the headline indicators as have already been used for the quantitative results (personal well-being, social well-being, well-being at work) along with their subcomponent indicators. It needs to be recognised that the indicators utilised within the national accounts of well-being survey were not

always terms that were used in everyday language to communicate changes to well-being, for instance, participants reported changes to their physical health but did not use the word “vitality”, neither did they refer to “positive functioning” moreover they were likely to use terms such as “motivation”, “confidence”, “control”, “focused” etc. There has therefore been an element of judging how best to organise the qualitative findings in order to accurately reflect the changes to well-being that took place, the findings below reflect the headline indicators and then an outline of the content of these is subsequently provided.

4.5.3.1 *Personal Well-being*

The category of personal well-being according to the survey, includes: positive functioning, satisfying life, vitality, resilience and self esteem, and emotional well-being. In addition to these, the findings drew several discussions related to changes to psychological well-being. While participants reported changes such as “increased perspective” these findings will be covered as part of the causal mechanisms covered within the next section as they underpin several of the changes reported here rather than coming under the definition of part of mental well-being. The findings related to each of these are outlined in turn.

Positive functioning

According to the Survey, positive functioning incorporates autonomy, competence, engagement and meaning. These were not words that were specifically talked about within the interviews other than in reflection to their survey results. Comments in response to their results were quite tenuous such as “*I get a lot more done*”, some of it was reflecting negative thoughts about

whether they were free to do what they wanted to do, yet for others, they found that in light of challenges, they functioned more positively. Looking in more depth into the components of positive functioning: competence, one participant commented: *"I can see how I've grown into my role ... there was a lot of things I put into place to get here, ... and well actually I should be in this job!"* (CEE3). It seemed that the coaching assisted the participant in recognising what had taken place in order to be competent in the role. The remaining components: autonomy, engagement and meaning did not specifically appear in the results.

Resilience and Self Esteem

This category is specifically within the survey but also came up regularly within the interviews. In the focus group it was discussed how well-being scores may have decreased or been lower than the actual recorded score had it not been for participating in the coaching, because the resilience that was learned buffered the results, so for instance:

"rather than seeing an increase in your mental well-being over the last six months, it stayed the same so the impact may be the increased resistance to the change, or increased resilience... I think some of the group have been through quite a lot of personal or work situations that might have normally meant that well-being would have gone down irrespective of the course, but one of the benefits, is through this course, that has helped us stay on an even keel even though we have had some significant things going on. So perhaps how we measure that ...it won't necessarily show an improvement in the mental well-being, it might have gone down, but it might have gone down further had we not had the benefit of the last 6 months" (Focus Group).

This was usefully related specifically to some of the training on the programme:

"the online course...there were some key pieces of information that I didn't know, including that early in the morning your resistance is at its lowest ebb for stress, so when I found myself waking up anxious in the mornings, before I knew that, I'd just lay there and let things mull, after I got that information and it sunk in, I was able to think, oh yeah, this

is the early in the morning stress thing and it will go, and just knowing that was enough for me to just let it go, so it did improve how I felt in the mornings, just from having that piece of information” (Focus Group).

Confidence also had a knock-on impact on whether a participant took an action that may have contributed towards their well-being. Several coaching sessions reported to work specifically on confidence with the result that they either felt that they could then go and do what they wanted to do, or gave them clarity to know what they wanted to do, or a recognition of their skills and what they had achieved: *“it’s made me more self-confident in what I am doing at work, that actually I know my job, I am good at my job” (CEE8).*

Satisfying life

Once again, “satisfying life” was not a term that participants used to describe their well-being other than relating to the survey results where some participants could relate to recognising that they had a satisfying life, they had made changes to their life, and particularly their outlook *“So, satisfying life, it is the same life, it’s just my attitude to it that’s changed but I haven’t managed to change enough to make my life satisfying but changed myself in it” (CEE9).* For another participant, completing the well-being survey made her review her life in light of the questions and she realised that she was “isolated” and this made her reflect, plan for the future and explore her options:

“in terms of satisfying life, being able to look at the things I wanted to look at, so I could plan for the future better. I’ve started exploring options. Yeah life has become more satisfying just because of that and because I’m getting out more and making, I was doing hobbies a little bit before, but I am doing them a lot more now, doing painting, a lot more walking, and I am spending, I was doing it before, but I am spending longer and larger amounts of time with family and friends” (CEE19).

It was also acknowledged that many satisfying life factors were not in the remit of the coaching and may have happened anyway, so changes at work, house moves, work-life balance etc. However, the coaching may have made them be aware and reflect on this and change their perspective on whether it was or wasn't a satisfying life.

Physical Well-being/Vitality

While the coaching programme was not targeting physical well-being, this was often mentioned as an outcome or focus for the coaching sessions. Several participants became more aware of their physical health and well-being including prioritising exercise, eating healthier and losing weight and generally looking after themselves; one coach said about her coachee:

"She had already made changes to her diet, we then agreed a few little things for her to do, but she went over and above in fact and had made a lot of changes in her life, which had this major influence on her well-being and general health" (COA17).

Another participant was struck by the link between physical well-being and mental well-being:

"I think I understand or I believe that there is such a direct link between physicality contributing to well-being and I was really struck at some point during your sessions, we were talking about getting enough sleep and eating properly...I have a greater understanding of the physical things there...I have learned that my mental well-being has impacted my physical improvements" (COA15).

Vitality was another of the measures from the survey and this was reflected in participants responses to external factors such as the time of year, time of day when the study was completed, the amount of sleep they were getting or the amount of stress they were under. Furthermore, several participants had health

concerns which impacted on their vitality. Where vitality was health-related, it wasn't felt that the coaching impacted on that area.

Emotional Well-being

Emotional well-being within the survey relates to the existence of positive feelings and the absence of negative feelings. Participants drew reference to the subjective nature of completing a survey and how the findings often reflected whether they were "having a good week or not" and this especially related to life changing events that happened during the course of the coaching programme. It was also discussed about the participants own personality (whether they were optimistic or pessimistic). Comments related to the coaching were that some participants felt that they were thinking more positively and one participant noted: *"I can definitely see that the coaching has helped in regard to the absence of negative feelings, it's not necessarily that they're not there, it's just that they are less-loud and that's definitely helpful"* (CEE8). Another participant commented that the coaching made her feel not just more positive, but brought out what she could do to increase her positivity:

Interviewer: *"How did the coaching make you feel?"*

Coachee: *"like I could make my life more positive, it was more positive reinforcement, more encouraging, more self-affirming"* (CEE9).

4.5.3.2 Well-being at work

The survey did not specify any sub-components of well-being at work but asked questions related to reward and recognition; job security; job satisfaction; work-

life balance; engagement; and stress. All participants were working and the coaching was undertaken as part of their working day, therefore several different elements of work-life well-being were raised as relevant, including work-life balance; actions and goal setting; self-care, managing stress and anxiety.

Work-life well-being

Participants reported that the coaching made them reflect and take action on their work-life well-being, whether this was in terms of physical exercise or undertaking health-related or leisure activities e.g. yoga, painting, relaxing, it was about taking time out of their working day to prioritise their well-being:

“I think the coaching has helped me to realise that this is essential for my well-being, it is not a luxury, and I do put swim in my work diary because I think actually that's fine, I work 32 hours a week...but actually that scheduling time in and being proud of the fact that you are looking after yourself and demonstrating that to others at work is really important, particularly in the environment that I am working in at the moment where people generally work through lunch hours, weekends, it is a very full on environment, I know that it is essential for me” (Focus Group).

Another participant reported reducing the amount she worked outside of work hours e.g. evenings and weekends: *“I was just working regardless of whether I had evenings to work or weekends, so I was just working solidly because you could in this job. So that's been one of my big changes” (CEE14).*

One participant reported making changes to her work-life balance but this had slipped by the time the interview took place (although she felt her outlook was better and she tried to look at things from a different point of view). Another participant upon realising that too much work was having a detrimental impact on her well-being, spoke to a colleague who had too little work and together they

managed to balance their work and on top of this, she took steps to undertake more leisure activities.

Another aspect of work-life well-being is that participants reported greater levels of self-care activities, so for instance taking time out for themselves and recognising that they can take time out for themselves and recognising what support they might utilise and when they may need coaching. On top of this, coaching itself was a form of self-care because it was taking time for themselves during the sessions: *“this course has been good for me because it has helped me focus a little bit on myself. In a way that it has made recognise, it has allowed me to have a little bit of time out and in doing that it has helped me recognise areas I need to work on to improve my well-being”* (COA7).

Actions and goal setting resulting in more satisfying work

Participants appeared to take actions which made their life and work more satisfying. Participants reported making changes, improvements, and taking action on issues. The coaches in particular felt that they were strong in this area:

“We thought that as coaches we are almost more able to kind of use those tools a bit on ourselves, and make our own goals more achievable more quickly, like we might have done that in a meandering way before, but having that knowledge makes it more focused, recognising our own values and priorities about things does help with our own well-being, goal setting and achieving, that's about setting our own goals” (Focus group).

It also extended to challenging themselves with making changes to their well-being. One participant reported taking specific action that improved her well-being and was aware of the actions she was taking and the impact this was

having on her well-being. Fundamentally, participants reported being aware of different aspects of their well-being but took action as a result of this.

The changes that took place were not always improving well-being, sometimes they stopped a participant from getting worse, so the resilience to cope with life's challenges, one participant said that she realised the impact of stress and this made her make changes that she felt stopped her from "burning out" (COA18).

Participants seemed to recognise the impact of actions on their well-being and became quite specific about what they needed to do, so setting actions, planning and giving themselves targets. Another participant commented that they would choose coaching as an intervention because *"it comes as part of that process of moving towards goals, it's very clear...because there are goals, means you have something to check in with all the time, how close am I getting, am I getting close, if not why?"* (COA15). Generally, participants reported if not achieving them, then certainly working towards their goals.

Goal setting and taking actions was not something specifically related only to the coaches, the coachees also reported success in this area and this was also noticed by their coaches: *"I think that gave her some insight to make some changes which she has done and she is now much more positive, she's taking the steps she's been talking about for quite some time to get out of the situation she doesn't want to be in. Previously she's been talking about what she would like but then not taking any action, but now she's actually taking the action"* (COA9).

Some of the coaching was specifically around coping strategies and these were reported to have helped participants, so they were then using these strategies to help: *“I feel like I’ve got some tools to think about how to change things”* (CEE24). Similar to this some participants reported being more organised: *“I have put some things in place that have made things much more easy to cope with”* (CEE14) which they felt they wouldn’t have done if they hadn’t had the coaching conversations. Another participant reported having made more of a concerted effort to organise her time at work rather than worrying about it (COA10).

It was also mentioned that coaching can put pressure on the coachee, for example striving for something but that coaching can perhaps buffer the response to increased pressure: *“interestingly, had I not had this (coaching), I wonder if I would have gone off with stress, burnout because I did get quite close, but luckily this really helped me, particularly...to actually think, get a grip, look at the issues here, what are we going to do, how are we going to manage this situation?”* (COA18). This also demonstrates the pro-active goal-setting nature that assisted participants in managing their well-being.

Reduced stress and anxiety

As has been discussed in the literature review, the terms stress and well-being are often used interchangeably, it is therefore unsurprising that participants related changed to well-being to include reduced stress and anxiety. As already mentioned, one participant became aware that she was near “burnout” and took actions from the coaching to reduce the levels of stress and introduce well-being-related activities. For another participant, taking action on a career situation

meant that the stress and pressure was relieved. Furthermore, one participant was actually coached about feelings of stress and anxiety which resulted in greater feelings of calm and more rational thoughts. What appeared to be pertinent is that stress can't always be controlled, for instance, life changing events, but participants seemed better able to cope: *"I recognised I felt stressed, but I suppose I know how to stop making it worse, now I know myself well"* (COA17). Furthermore, another coach explained that she had experienced work-related stress and the coaching had helped her get better at managing it: *"I feel more relaxed about the smaller things, so I don't get stressed as quickly, and if I start getting stressed, I recognise it more quickly. So, I do something about it rather than letting it build and I think the coaching has helped me to get even better at doing that"* (COA9).

Another coach related to her experience of coaching another coach: *"the areas that she was getting stressed about at work in particular, were things that she didn't have any control over ... she hadn't recognised that before, then that was quite a lightbulb moment"* (COA7).

4.5.3.3 *Social Well-being*

Within this section, the survey results of supportive relationships plus trust and belonging were included along with the interview results which also demonstrated the ripple effect to people outside of the coaching.

Supportive relationships

Participants reported a greater awareness around their support networks, so participants mentioned speaking or taking more time with friends and accessing their support networks: *“one question that really shone a lot of light on things from the last survey was about “do I have people in my neighbourhood that I am close to?” and I thought there’s nobody, you know, there’s just nobody and I thought this isn’t what you want is it”* (CEE19). Another participant recognised that she had too much work and by sharing this with a colleague, they were able to work out a better balance: *“she’d learned about delegating things more and trusting people and was trying to delegate work more, and the other thing was it sort of affected the relationship with her husband as well who was coming swimming with her, so she was benefitting from that”* (COA17).

As mentioned previously, support was one of the key processes of coaching that impacted on well-being. Interestingly, one participant said that she wouldn’t necessarily seek coaching because she felt she had a supportive family network whom she could bounce ideas off, so while some evidence demonstrates the outcome of recognising and seeking support, this may happen as an outcome regardless of the coaching.

Another participant recognised that it was good to talk as she had previously had a tendency not to trust people and that she had noticed a difference and was seeking to meet with friends more often and recognising how important this was for her. A similar extension of supportive relationships is actually asking for support. So, one participant said that she was much more able to recognise

when she needed to ask for coaching and equally support others through coaching.

Another participant recognised how important it was for her to feel connected: “*so not working in isolation helps me feel connected and if I feel connected then that’s good for my mental well-being*” (CEE24).

When relating specifically to the results from the survey, participants relayed how supportive relationships can often be about the family set-up, so whether they have family living nearby, the size of the family, moving house or living remotely. So in many ways, supportive relationships are often outside of the control of the coaching relationship and outcomes, yet having raised awareness of the importance of support, several participants took steps to improve their immediate supportive relationships.

Trust and Belonging

Trust and belonging was not a specific area that arose as part of the discussions about well-being other than when the interviewer relayed the survey results. Similar to the above, it wasn’t an area that was necessarily within the immediate control of the participants, the relationships between family members impacted on this as well as considerations around the working environment. One participant in particular echoed this within her reflections on the results to her survey: “*the trust and belonging, I immediately look at that and I instinctively think work, working environment, strong family around me, support. I trust without*

questions within my immediate orbit, but for a little while I stopped trusting my working environment” (COA15).

Ripple Effect

The changes that took place as a result of the coaching were not always limited to the participants own experience, several participants mentioned the ripple effect to other people around them, so for instance the benefits that would not have happened had the person not experienced coaching: *“it has got me out walking once a week but bringing others with me and I have been talking to people I wouldn’t talk to before, and learning about them, so, the ripples are going out” (COA16).*

Participants reported changing how they listened and spoke to other people and received positive comments about this being helpful. One participant as a direct impact of being coached, changed how she managed her work-life balance e.g. not working outside of work hours: *“we have all changed the way we work because of the way I have put my foot down and gone, this is what I am doing, why don’t you come with me, because you are doing that training with me tonight, so why don’t we walk our dogs together and I kind of forced them into doing it, and also I think once one does it, it gives others permission to do it” (CEE14).* Another participant spoke up at a meeting about the benefits of well-being and the impact on the business and was asked to be part of a well-being initiative going forward. Another participant changed the way she spoke to her daughter and by adopting coaching questions, they had a very different result: *“it is a*

complete change in her so it's put a change in me as well. It is the ripple effect and I don't think people recognise that that happens" (COA14).

4.5.4 Conclusion to section

Large amounts of information were covered within this section, what this demonstrates is that, following the previous question that showed that participant well-being changed as a result of the coaching, there are many changes that form part of the overall improvement to well-being. Section 4 outlined the quantitative changes which included: significant improvements in vitality, positive feelings, resilience and self-esteem, positive functioning, emotional well-being, autonomy, engagement and personal well-being. This section has relayed the qualitative findings which has demonstrated complimentary findings for vitality; resilience and self-esteem; emotional well-being; and some element of positive functioning. Furthermore, positive findings were discussed for changes to aspects of: satisfying life; work-life well-being; and social well-being which link to the quantitative findings but which were not significant according to the statistical tests. What is pertinent about these findings is that as discussed in the quantitative findings, the main observed changes that align between both sets of results are predominantly part of "personal well-being" therefore implying that while changes to both well-being at work and social well-being were made, these were less significant and as discussed, this is unsurprising as both these components could be outside the control of the participant, whereas they could have more ability to make changes to their personal well-being e.g. vitality and resilience and self-esteem. The significance of these findings will be discussed in the next chapter.

4.6 Causal mechanisms that contribute towards changes in mental well-being?

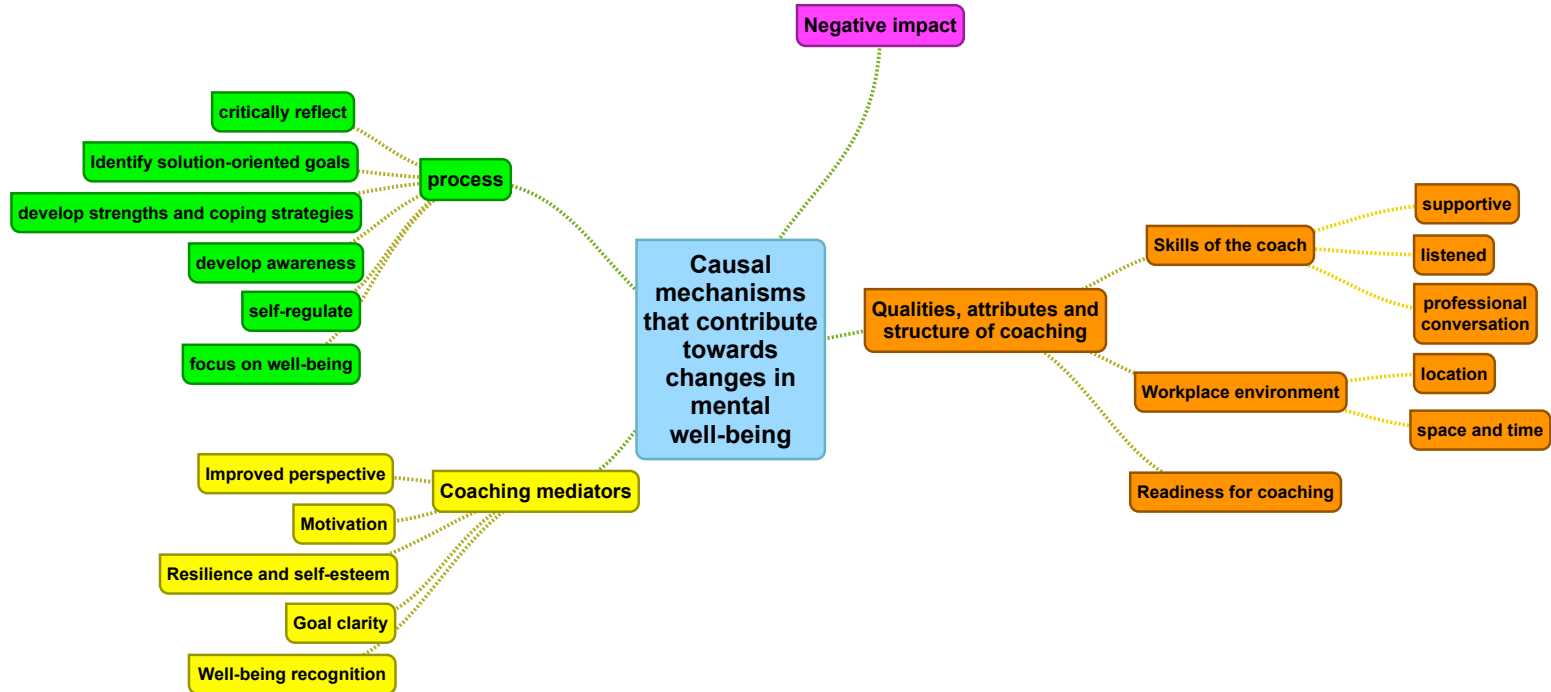


Figure 35: Mind map of the findings related to the causal mechanisms that may contribute towards changes in mental well-being

4.6.1 Overview

During the interviews and focus group, many areas of the coaching and training process were reported to impact on mental well-being. However, several mediators of coaching were also identified that made reference to outcomes from coaching and help to explain how and why coaching works. It is within this question that the process of retrodution is fully implicated: it was not expected that participants could be truly aware of the causal mechanisms of coaching responsible for creating changes to mental well-being. This became apparent within the research process where participants were unable to fully explain without prompting, which coaching tools, techniques and processes had made the greatest impact. For instance: *“I think it is difficult for me to explain how it works”* (CEE19).

Participants also described changes as a result of the coaching that did not fit the description of well-being, the researcher is therefore able to infer that these aspects were actually causal mechanisms (mediators) underpinning the changes. For instance: CEE13 said that the changes to her mental wellbeing *“helped validate some of the things I was already thinking”*. This was also repeated with some of the coaches too, COA10 said: *“I have been more reflective and rather than focus on the things I haven’t been doing, I have been doing them instead”*. Furthermore, COA9 said that the change to her wellbeing from the coaching had been to be more “aware”.

Several participants referred to the qualities, attributes and structure of the coaching in terms of the supportive factors that contributed towards well-being

outcomes. While these were not originally part of the research design, their inclusion within several of the participants interviews, implies the importance of these aspects.

Finally, it was recognised that there are some obstacles which impact on coaching efficacy such as the acceptance of coaching within the workplace and these have been outlined in the final section of this chapter.

Each of the causal mechanism have been categorised as outlined below and will be discussed in turn:

- The coaching process
- The coaching mediators
- The qualities, attributes and structure of coaching
- Obstacles to coaching efficacy

4.6.2 The Coaching Process

Due to the lack of primary research focusing on the coaching process, this was a key area of interest with the research and explored through the focus groups and interviews. Upon starting the research for the PhD, it was thought that there were a series of steps that a coach undertook with a coachee and that this “process” may lead to well-being outcomes. However, the findings were not as clear cut as this and demonstrated that while several key areas of the process of coaching were highlighted as important mechanisms for change: (*develop awareness; identify solution-orientated goals; develop strengths and coping strategies;*

critically reflect; focus on well-being, self-regulate), these “processes” were not only taking place as a step within the discussions between the coach and coachee, but could also reflect the changes that were taking place internally within the coachee. Therefore, the term coaching process is defined as a series of actions or steps that a coach undertakes with their coachee during a coaching session and the cognitive process that a coachee experiences during the coaching. Each of the stages of the coaching process will be discussed in turn:

Develop Awareness

Awareness was probably the most popular topic when it came to discussing changes that took place as a result of the coaching providing for the explanation of the coaching process and the impact on the well-being of participants, both practically and inferred through what was being said. This is likely because “self-awareness” was specifically probed during the interview as a key component of coaching for well-being. Participants used the terms “awareness” and “recognition/realise” interchangeably, throughout the interviews for instance, “*to just be more aware of my overall well-being and I think it has given me the determination to make steps once I have recognised what needs to change*” (COA7)

In analysing the results, it was felt that a distinction between these two areas was useful and therefore *awareness* was thought of in terms of improving knowledge and understanding of information as well as self-awareness which was achieved by means of a coaching process, whilst *recognition* was defined in terms of recognising traits, patterns and behaviours in themselves that had arisen

particularly as an outcome of improving their awareness (the latter will therefore be included in the next section which discusses the mediators of coaching)

Awareness came for some, in the form of a “lightbulb moment”: *“I think that was the light bulb moment when I realised that as I was talking to my coach...and it was just like a lightbulb moment, I thought oh my goodness, that is obviously the thing that is holding me back from taking care of my own well-being”* (COA7).

The coaches received both coaching and training which was designed to raise their awareness about mental well-being and coaching skills and it appears that this was a useful mechanism by which participants could gain new knowledge and become aware of their level of well-being and recognise what they could do to change it:

“I think actually on one of the training days...I had a bit of a lightbulb moment when I did actually realise: I’m sat here worrying about all this stuff, but it is not going to change unless I change it and that’s kind of a self-awareness moment...I’m the only one who can change it, I can’t wait for other people to do it, or wait for it to just happen, it’s got to be me” (COA10).

This also demonstrated the awareness of accountability that some participants expressed as a useful part of the coaching process.

However, the result is not exclusive to the training: sometimes awareness came through exercises, for example values and goals, conversations with the coach, or the reflective process following coaching, *“the values assessment was really useful... there was a values conflict going on there, which she hadn’t realised and it wasn’t until she did the values questionnaire that she realised that, so that was really eye opening for her”* (Focus Group).

Even the questionnaire which was used to measure well-being was reported as helpful in raising awareness:

“The initial questionnaire we did, I was quite shocked at the results that came back, how poor my well-being was at the time and I hadn’t realised ... it made me realise my focus was on everybody else and not myself so it made me question things like my self awareness and being more aware of my own emotional well-being, which then made me look at my values as well” (Focus Group).

Another participant gave an example of someone she coached and the impact also of the well-being questionnaire as a tool within the coaching: *“I’ve used the questionnaires to give that to the coachees to complete, and that helped kind of explore and understand their issues and what they were going to do* (Focus Group). Furthermore, some coaches provided information about well-being prior to the coaching session and this also prompted awareness: *“she sent me some stuff before I met with her, so I could read it and that made me realise, oh my goodness, I do really need to sort lots of things out”* (CEE14).

Interestingly, the advantage of working with both coaches and coachees is to consider the difference between the two groups and this was highlighted within the research and particularly in relation to this point. The coaches recognised the awareness that comes from coaching others; *“you learn a lot through the coaching don’t you, as well, through the listening and supporting someone else, I think it is a knock on benefit isn’t it and that is sometimes where it makes you question about your own well-being”* (Focus group).

Therefore, it appears that in addition to the training, there were a variety of tools adopted within the coaching which assisted in raising awareness as a route to improving well-being and in turn, participants then recognised what could be

different and resulted in coaching outcomes. This highlights the importance of awareness but also that awareness can come from a variety of sources, not just the coaching.

Critically Reflect

Another common area that was raised as being an important aspect of the coaching process was reflecting both about well-being, the topic of the coaching but also about their circumstances. This sometimes led onto reflecting about how they could solve their own problems (this will be discussed further in this section in relation to the self-regulation cycle). One participant said, *“I didn’t consider the mental health side of things until coming to the sessions and after I did that, I was able to reflect back on my own mental well-being”* (CEE21). Some of the coaches used their own reflection to relay information back to a coachee which helped them to see things differently and for others, the coaching session made them *“take a step back and think about the way things are”* (CEE9). When looking at the overall impact of coaching on mental well-being, the following answer was given: *“it is good to be able to talk to someone about... so it is good to stop and reflect on and think of a question more long-term because I tend to get more focused on...what’s going on day-to-day rather than our goals”* (COA17).

It also seems to have provided participants with reflection in between coaching sessions and furthermore, the schedule of the next coaching session in the diary seemed to prompt this: *“there was that kind of opportunity to sit and think about it in between, because you knew you were coming back in to it, so you could really sit and think about it before you came again”* (COA10).

It also became apparent that the reflection in the coaching session sometimes came from the coach asking open questions; *“the reflection and repeating what I’d said and the questions following it were thought-provoking”* (COA11). One coach was reflecting back to a coachee what was being said and this led to a level of awareness that she referred to as a “lightbulb moment”: *“when you reflect language back, it is quite a powerful thing and...I was so unaware”* (COA7).

Some of the coaches challenged the reflections of coachees in order to keep them motivated and goal focused: *“she kept going back and reflecting on things and why she didn’t do things, and I kept steering her forward into...so instead of thinking why didn’t I tidy my shed, think about how am I going to tidy my shed, what is going to energise me, how am I going to approach this”* (COA13).

The process of coaching encouraged participants to reflect on various elements of well-being across their work and personal life and the hour and a half coaching session gave them time and permission to do this. One participant commented that she is far more reflective than reactive following the coaching, whereas another participant commented that taking the time to reflect on their situation made them think about it in more depth and commented that it was *“a real turning point”* (CEE14). Reflection was also useful to defuse some situations, so one participant commented that talking through the problem meant that when she now reflects back on the situation, she doesn’t feel as affected by it. For several participants, akin to awareness, the coaching has given them a point of awareness to reflect on their well-being.

Reflection wasn't only commented to be related to thinking, it also drew attention to the responsibility to take action: One participant commented that she had a lightbulb moment where she realised that she was worried about different things but they weren't going to change until she changed it. Another participant similarly commented: *"I have been more reflective and rather than focus on the things I haven't been doing, I have been doing them instead, that has been the main change. So, I have put quite a few things into action that I wanted to for quite a while but just hadn't done it. I would say my well-being has gone up. I could say that this has been an influencing factor on it"* (COA10).

Identify solution-oriented goals

Goals have been explained as a core part of the coaching process and can be a tangible outcome that can be experienced as part of the coaching. The findings suggested that goal setting, coming up with your own solutions, future planning and solving problems were important parts of coaching *"it comes as part of that process of moving towards goals, it's very clear, it is a clearly set out direction of travel, because there are goals, means you have something to check in with all the time, how close am I getting, am I getting close, if not why?"* (COA15). Particularly for well-being, this has been useful: *"coaching because it focuses on the future and goals, it's far more positive, it makes you move on, so I think it's a really valuable tool for well-being and any kind of problems in life, let's not dwell on why we're here, focus on where we want to be"* (COA13). For others, it helped to take time to formulate ideas: *"I think as we said, the action plans, having to sit down, formulate ideas and put them on to paper I think helps"* (COA3) and solutions *"I did a lot of self-talk around, come on ...you've got to be positive,*

you've got to work to find a solution to where you are, so definitely its helped significantly" (COA6). When combining goals and awareness, it can be seen how these together can be of benefit *"I think it's an understanding of the process around achieving goals, achieving outcomes, kind of breaking them down into bite-sized pieces that aren't too overwhelming"* (COA6).

Develop strengths and coping strategies

Coaches will typically not "tell" a coachee what to do however, it was a theme within the interviews for a participant to discuss the positive impact of coping strategies, so sometimes this was strategies to think about physical health, awareness, for example: *"teaching me how to handle my negativity and negative thoughts"* (CEE9), resources: *"I've got more resources there that I can call on if I need them, so I feel more secure and resilient"* (COA13). Or even coming up with their own strategies for coping: *"when I feel at the end of the week, exhausted or something, I look at those strategies again, go right, I know what I am going to do to get through next week, and then I will be well under way to feeling great again"* (CEE14).

Focus on well-being

The Coaches took part in a "coaching for well-being programme" and this would more than likely have focused their attention on well-being, but also subsequently the coachee's who they recruited. Furthermore, by asking them to be part of a Ph.D. looking at the impact of coaching on mental well-being (and completing a questionnaire around well-being) would again have directed their focus.

Some participants didn't take part in the coaching directly to improve their well-being but recognised a need to do this as the coaching developed:

Interviewer: *"Were you specifically looking to change your mental well-being?"*

Interviewee: *"I wasn't aware what I needed...it was quite difficult to see how I could progress and I wasn't really aware of well-being coaching as something that could help, so...I think the answer is no I wasn't aware, but it was necessary"* (CEE25).

This biased-focus has impacted the results, however, some participants still raised focus as an important aspect of the coaching process (and also an outcome). *"it made me realise my focus was on everybody else and not myself so it made me question things like my self awareness and being more aware of my own emotional well-being"* (Focus Group).

Coaching can be quite a focused process, particularly reflected through the goals and actions that are taken as a result. Participants reported having a greater focus on well-being, mindfulness, self-awareness, emotional well-being and values. The Coaches also used focus within some of the sessions to direct attention: *"she got to the right point, she narrowed down things because I suppose I started thinking you know, I don't really know what I want to be coached on"* (COA5).

Self-regulate

Half of the participants were coaches which has provided the opportunity to review the results considering the difference between coaches and coachees. What has become apparent from the quantitative results is that although coaches had a higher level of well-being at the start and end of the coaching programme,

it was the coachees overall that had a greater improvement in their well-being score. The interviews with the coaches explored this point and it came to light that being a coach in itself offers benefits to well-being. There was a general consensus that being a coach could result in higher well-being because (a) there is a reflection process that takes place i.e. a similarity of situation which enables shared learning to take place (b) they reflect on the tools they are using for the coachees which reminds them to use them for themselves; (c) improving their own self-awareness *“I think through coaching others, you improve your own self-awareness, and through that you are able to achieve insights and improve the way you view life, through your own lens”* (COA2).

One of the coaches related the benefits of coaching to that of teaching and that by sharing a coaching skill or technique, it is of benefit to both parties:

“It’s like with anything, I think when you teach, you learn yourself, so when you share something, I think you need to have quite a good awareness of things to coach, because anything can come up in a coaching session and you need quite a broad awareness of stuff to draw on, whether it is about managing people or looking after yourself, career progression, so I think it encourages you to stay open minded and stay knowledgeable and stay aware of things” (COA13).

For other coaches, it gave them the tools to self-coach and reflect: *“coaching gave us the ability to identify our own needs, to talk to ourselves, using some of the techniques, and almost to self-coach”* (Focus Group). However, the coachees also commented that within the process of coaching they started to self-regulate and answer their own questions: *“I look at those strategies again, go right, I know what I am going to do to get through next week, and then I will be well under way to feeling great again”* (CEE14).

4.6.3 The Coaching Mediators

The second part of the findings related to the causal mechanisms of coaching were the mediators of coaching efficacy. This suggested that *well-being recognition, perspective, goal clarity, resilience and self-efficacy and motivation* were important mediators of coaching for well-being efficacy.

Well-being Recognition

As discussed in section 4.6.2, awareness and recognition were terms used interchangeably however, it is felt that recognition is more accurately reflected in terms of the coaching mediators, while awareness is included as part of the process of coaching. Yet, the order by which recognition is achieved is inextricably linked to awareness, for instance, in relation to the coach-training, one participant commented: *“So we talked quite a lot about self-awareness and how being aware of things helps us to take actions to recognise our stress triggers more ably and be able to change our thinking and also to recognise that we have choices in the way we react to certain situations”* (Focus Group). Furthermore, that participants recognised the outcomes from the coaching: *“I have noticed that my negative thought patterns have decreased and the positive thoughts patterns have increased and I think the co-coaching sessions have helped”* (Focus group).

Several of the participants reported being more aware not only about mental well-being but also recognition of their own thoughts and behaviours that may be reinforcing or detrimental to their well-being. For instance, one participant explained how during the course of the coaching, she took action on her work-life balance by leaving all work equipment in the office when she went on leave

(which would have been different to her previous behaviour). The result of this was that she felt calmer when she went back in to work; wasn't trying to solve the issues of others; and was better able to deal with situations in work. Another participant recognised through the coaching that she was nearing burnout and "had a bit of a wake-up call" and as a result, she was taking very distinctive steps not to burnout.

Recognition was noted in terms of how the participants used the coaching: "*I hadn't really spoken to anybody else about it and so it was being able to do that and feeling that it was safe...it was the emotional side that I needed to tackle and the coaching allowed that*" (COA16). Furthermore, recognition about how participants looked after their own mental well-being: "*I think for me it has helped me recognise when I think negatively about myself and I stop myself now and try and think of something positive instead of going down the negative thought train*" (Focus Group).

The difference in the results between the coaches (whom were trained in awareness skills) and the coachees (for whom, this may have been the first time they discussed well-being), was pertinent: coaches tended to mention awareness in relation to their well-being and then recognise what steps they could take as a result. "*I have noticed more self-awareness definitely, and recognising when things are getting too much, and recognising, I think small change I can do too*" (Focus group). Whereas, the coachees had a tendency to "*think they were alright*" and then through the survey and subsequent coaching sessions, recognise that improvements could be made: One participant commented upon

her first discussion with her coach *“oh my goodness, I do really need to sort lots of things out”* (CEE14). Whereas, once the coaching had concluded, coachee 14 commented *“by the time I went to the third, I was like, yeah I am completely sorted”* and others coachees suggested: *“I’m more aware of my well-being, I’m more aware of what I need and what I’m not doing, I’m more aware of what the struggle are, and I think again, before changes can take shape, you’ve got to be aware of what the problem is before you can find the solution”* (CEE24).

Improved Perspective

Further investigation into causal mechanisms found that *perspective* was discussed and subsequently changed as a result of the coaching. Coaches described the role that they played in this process by *“holding a mirror up to someone else”* which helped both the coach and the coachee to see things from a different perspective.

The well-being coaching in itself, offered a different perspective to thinking about a participant’s situation. One participant suggested that the emphasis on well-being had an impact because *“whatever you’re coaching on, always comes back to your well-being”* (COA3). The coach in this instance used the focus on well-being to assist his coachee by asking: *“what impact has this had on your well-being?”* Other experiences of the coaching demonstrated that the coachee’s own perspective of their situation was different from how the coach interpreted it (e.g. well-being survey results) and therefore whether well-being was now a priority for them.

While coaching traditionally isn't usually giving a coachee answers (or their opinion), it was found to offer a perspective and ideas and because the coach was impartial, this seemed to be taken as useful: *"I think having somebody independent of you as a person and who doesn't know your background can give you a different perspective"* (COA21). Another coachee offered: *"I think it can offer a different way of looking at things, because sometimes you get stuck in a set way and you don't always see it from another point of view but working with somebody else you can either then see it from their point of view or you can both see it from a different point of view and you can almost, then see it objectively as someone else sees it"* (CEE8).

It appeared that through the coaching, participants considered their perspective and often changed how they viewed a situation. For instance, reframing a negative view; changing their reactions; seeing the bigger picture, which reduced feelings of stress in the moment; having a more positive outlook; being less judgemental; and perhaps most importantly, changed participants' perspectives about the importance of well-being: *"I've allowed myself to take time out to do things for myself and not feel guilty about it and not feel that I should be doing something else more productive...that the level of important of my well-being is just as important, and if I don't care for my well-being, then I am not in a fit state to help anybody, so it is quite a fundamental thing"* (COA7).

Goal Clarity

Another area that sometimes follows on from perspective is clarity. It appeared from the results that the coaching sessions offered clarity about a participants'

situation, choices, questions or goals: *“I think it’s definitely helped, because it’s just helps you... gain clarity, helps you prioritise, helps you think about ways forward, things you can do... plus it’s having that space and being able to talk about something”* (COA5).

For some participants, coaching gave them clarity by being able to answer big questions that they hadn’t been able to answer elsewhere: *“coaching can help you get to a solution, see through the clouds if you like and understand what you need to do in order to get through and to achieve the desired outcome rather than just sitting”* (COA9).

Several participants became clearer on their choices and made decisions related to their career or personal life and this also appeared to be underpinned by the confidence to follow that decision through. One participant commented about the impact of the coaching:

“I found they helped me focus, helped me plan things better, look at things differently...someone else reflecting back what I am saying helps me get further ideas...actually talking things through, planning things; what we were going to do, putting in actions and systems has helped because it feels like yes, I’m getting to grips with this, something’s happening, so its felt very reassuring” (CEE24).

The Coaches used tools such as the questionnaires and the Ladder of Inference, and models such as TGROW, as well as values assessments, visualisations among others, and used these as a basis for conversation. What became clear is that it wasn’t necessarily the tool that was used, but the outcome from that tool, e.g. clarity: *“I don’t realise it, but she is asking very short questions and getting the information that I need sorting in my own head”* (CEE3). Another participant said

“one of the strongest things for me was it gave me concrete actions and tools to actually change things, it gave me some very specific insights...When you have a very specific handle on something, you can change it, whereas as long as it stays up in the air, you can’t pin down what’s happening in specific circumstances” (COA2).

Resilience and Self-esteem

This was another common area within the results, it appeared that the process of coaching aimed to build resilience and self-esteem through the exercises and coaching conversations. In one coaching session, the coach asked the coachee to imagine an A4 pad in front of her and how many lines she would fill with skills that she had acquired during or since her degree. She then asked her to go away and actually write the list instead of imagine it, the result of this was that it gave her confidence which subsequently allowed her clarity about what to do, she said *“it was a massive help because...rather than just thinking in your own head, it is there in black and white and you have achieved those things, so that was a big help, I really enjoyed that” (CEE18).*

All of the participants were asked to complete the well-being questionnaire and this sparked conversation about the results. One coachee said: *“It sort of makes you realise that although I might feel like things are really bad but actually look at all the good things you’ve got and I think [the coach] worked through those with me and pointed out, yeah you’ve got strong relationships and it wasn’t anything I didn’t know already but it was just nice to have it reflected back to me after the first session” (CEE21).*

Another coachee spoke about the qualities of the coach and that they felt confident talking: *“she was just very reassuring and just...positive*

reinforcement...and making me feel good about the things that I had achieved"
(CEE9).

More commonly, it was the coach concurring with the coachee which validated what they were thinking "*the big thing was having someone who seemed to listen to me and actually agree that what I was thinking was not unreasonable*" (CEE13).

Motivation

The final mediator of coaching to be discussed was increased motivation. The coaches were described to be "*helping just keep on it*" after losing the will; encouraging different thinking or ways to solve problems and keep going; reinforcing; to be aware of the different elements of well-being and aware of overall well-being. This resulted in "*the determination to make steps once I have recognised what needs to change*" (COA7). Motivation was also the topic of some of the coaching sessions, for example how to increase exercise, complete tasks, or overcome barriers.

4.6.4 The qualities, attributes and structure of coaching

While the research wasn't specifically focused on this area, it was difficult to ignore the impact of the three key stake holders (the workplace; the coach; the coachee) on the outcomes from coaching. The following areas will be discussed from the qualitative findings: **skills of the coach**: *supportive, listening skills; professional conversation*; **workplace environment**: *space, time and location of the coaching*; **readiness for coaching**: *desire to change*.

Skills of the Coach: Supportive

In particular, participants commented that the coaching was supportive, for example, in terms of relationships *“there was a feeling of certain togetherness in that we were all in a similar place, struggling with sleep and quite a lot of overwhelm, so I think that was helpful in terms of feeling that we are all in it together”* (COA18). Also, in the co-coaching as a network: *“just connecting with colleagues and sharing some of the challenges”* (COA18).

This is a theme that is replicated across both the coaching and co-coaching but in particular with reference to co-coaching: *“what I have got from this is to be with other people who are doing the same thing, to share some of that a bit has been really positive so you are not kind of alone with that. So just coaching other coaches and then coaching back gives you that space to go, oh I am not the only one”* (Focus Group).

The coachees commented that the coaches were supportive and which comes in different forms including *“just someone to talk to”, “sharing some of the challenges”, “helping someone to help themselves - collaborative”, “feeling connected”, “someone to sit and help you”*. In particular, one of the coachees commented in terms of having a supportive relationship with the coach: *“one of the big things when we first met was just that feeling that someone is looking after me”* (CEE23).

It was also commented that support could come in the form of the coach challenging assumptions and beliefs: *“If I heard her coming up with an excuse,*

or limiting belief, I would challenge it and get her to reframe it as a positive. I was quite amazed how quickly she turned around" (COA13).

Skills of the Coach: Listening skills

It seems obvious to say that listening is an important quality within coaching, but this was a key theme from the coachee interviews that highlighted its importance. There were many comments about this, including *"She really listened...when she asked questions she always seemed to ask them at appropriate times, so she sat there and genuinely listened...you are putting words to what is going on up there and you are not having to force somebody to listen to you"* (CEE18). Furthermore, that this was unusual: *"I think having somebody listen to you and actively listen to you is quite a treat"* (COA11).

Interestingly, the coaches reflected that a key outcome from the coaching programme and from being a coach was increased listening skills: *"I have been doing coaching for about 3-4 years, and that made a huge difference to the way I interact with people both at work and in normal social life, I find myself listening much more carefully to what people are actually saying...we thought that coaching increased our listening skills generally in the workplace and at home"* (focus group).

Professional Coaching Conversation

Naturally, there are a lot of components that differentiate whether something has a positive or a negative impact and it seems from the findings that the type of conversation the coachee was able to have with the coach impacted on the

results. In what has been termed a “professional conversation” i.e. *“it has been really positive for someone outside...there is no vested interest, it has been really positive to have that ...professional conversation with a professional from a similar background”* (CEE3). This encompasses several qualities:

- Friendly *“there were no barriers in the way at all, and she was lovely to talk to, really welcoming, not intimidating, like chatting to a friend really”* (CEE14);
- Impartial *“someone who doesn’t have a vested interest in the relationships in my team”* (CEE3);
- Similar background *“it’s probably quite helpful to have coaches that are linked in some way to the setting for some perspective”* (CEE22);
- Confidential *“for somebody to talk separate from someone else they know, I think the confidentiality would really help with that especially with the stigma with being stressed”* (COA17).

Workplace Environment

Many of the interviewees mentioned that space and time, were an important aspect of the coaching process which impacted on their well-being. For instance, during the focus group, the coaches reflected on what they considered was the coaching process that resulted in changes to well-being: *“you are allowing someone the space to explore how they got to where they are and help them to come up with their own solutions to move to the future”* (Focus Group). Additionally, this sometimes caused added pressure depending on the location: *“coaching allows anybody space and time to talk, and so we thought that is the key part of coaching in a workplace, but then we realised that in reality that isn’t always possible...so asking people to take time out to think doesn’t always align*

with an organisations priorities” (Focus group). The opinion of the coaches was validated by a coachee who commented that “I think it’s just giving you the time and the space to talk about what you’ve been ignoring, to ask important questions about your life and to explore your feelings around possibilities, to actually talk with somebody about possibilities” (CEE19). Furthermore, it didn’t always require a lot of time, “It gives you that time and focus and even if it is something little, you can do something with that” (COA5).

The location was also highlighted as important, whether it was a work or a home space, it was particularly about being in a safe environment, feeling comfortable, being calm. For some participants, it was about not being in a work environment and this was particularly highlighted with the blended learning course which could be completed at their leisure:

“I think the blended learning course in particular was good for me because it was almost like having a 1-2-1 and I was able to pause it where I needed to, to reflect and think about things whereas that’s a bit difficult in a course environment...I don’t know if somehow things hit home a bit more, because I was in a private space, I did it at home, sat in bed, and, I wanted to do it somewhere I was relaxed, not in a work environment so that I could really take on board what was being said and not have any distractions. So, it made me be more honest with myself” (COA7).

Readiness for coaching/desire to change

Finally, participants also commented that in order for the coaching to be effective, coaching had to be the right intervention for their requirements and they had to be motivated to change. This was highlighted as an obstacle to coaching efficacy and will be covered in the section below.

4.6.5 Obstacles to efficacy

While coaching was seen as effective by many of the participants, there were some common obstacles that impacted on the efficacy.

The workplace

Participants felt that there were obstacles around the acceptance of coaching/well-being within the workplace where some people were not given the opportunity to partake in coaching, for instance, during the focus group it was commented: *“The thing that I find most disappointing is that in the work context, my managers don't rate coaching at all, they are downright resistant to it”* (Focus Group).

It was felt that the priorities of the organisation and the opportunities of coaching were not always in alignment, for instance, the coaching gave time and space to think through a participants situation but busy workloads and commitments sometimes got in the way of this, for instance, one participant said *“there are times when I could really easily have just pulled this coaching for well-being, thinking just I can't do that”* (COA18). Fortunately, this participant didn't pull out, but others have not been included within the research because they were unable to continue having started the coaching, for instance, one participant was not given permission by her line manager. Therefore, it was felt that the organisation needed to understand the benefits of coaching for well-being so that time and commitment could be allowed and some discussion also took place as to whether the organisation needed a coaching culture/attitude to enable this. Part of the culture would also be whether people understood what coaching is, whether

someone wanted to be coached and for the coaching to be delivered appropriately for the individual e.g. line manager as coach or external/internal coach.

Professional person/Coaching relationship.

The coaches came from different backgrounds and while it is difficult to generalise, there was a theme of positive feedback related to their professional approach, confidentiality and that there was some sense of connection in terms of “clicking” or “gelling”, especially relating to the trust and rapport between the coach and coachee. Some participants reported an on-going relationship between the coach and coachee where they could “catch up again” in the near future, but this wasn’t the case for all coaching relationships, for instance: *“I don’t think that me and my coach were particularly well suited ... I think our values are very different and that there was a couple of times where that jarred and that shook my confidence in it... so that I put up barriers quite a few times because of that, and that was quite negative”* (COA10). Some participants had different coaches (during the co-coaching) and this offered insight into the efficacy of difference styles: *“both of the ladies were really good, they were similar styles but not the same, I think probably one would work better for me, but that’s not that the other one did anything wrong, it’s just that we didn’t gel I suppose”* (COA11). The reinforcing nature of coaching seemed to reflect this, for instance, the “catching up again” in a couple of months meant an on-going relationship between the coach and coachee was important but didn’t always work out within the coaching relationship.

Where coaching is not appropriate

Participants were asked what contribution they thought coaching could offer for improving mental well-being at work and whether they would choose it for this purpose. While many would consider it as an option, this was sometimes answered with some parameters around its appropriateness. For instance, *“I guess it depended on what was the reason affecting my mental well-being but yes certainly would be something I would consider”* (COA3).

There was some discussion on the difference between coaching, counselling and mentoring and that each of these provided an appropriate intervention for different situations. There were also obstacles presented about whether coachees were ready for coaching or perhaps more importantly, that there were situations where coaching was not appropriate e.g. where another intervention would be more suitable i.e. counselling or mentoring depending on the circumstances. Predominantly, it was felt that coaching wasn't appropriate when someone had very low self-esteem, clinical anxiety and particularly that it wasn't appropriate where they didn't want to have coaching: *“So overall I think we felt that coaching has got a very big place in the well-being of people at work but there are obstacles to get over and you need to choose the appropriate method, route for your team, for your individual and it's not that straight forward”* (Focus Group).

4.6.6 Conclusion to section

Over the course of the research an attempt has been made to not only answer the research questions but also to tease out the likelihood of the results actually

being due to the coaching. Of course, not all of the mitigating factors can be taken into account and very few qualitative results would be considered absolute, however, this section has begun to discover some of the causal mechanisms of coaching that may have contributed towards (or detracted from) changes to well-being. What has become clear is that it is not necessarily the tools and techniques of coaching, but more the outcomes from these that offer the greatest contribution; aspects such as a changed perspective or greater awareness and recognition about factors that impact well-being empowers people being coached to take accountability. Actions such as goal setting are popular within coaching and while this appears to be beneficial in itself, it is also the impact this has on factors such as stress management and career development that also offers further benefits. The qualities and attributes of the coach/coaching are also important components that contribute towards the end result. However, it is also recognised that some factors can detract from the efficacy of coaching, relating particularly across the three key stakeholders: the workplace; the employee; and the coach. These results accumulate a perspective of the causal mechanisms of changes to well-being that begin to build a picture of the efficacy of coaching as a methodology for instigating that change. Further consideration to coaching efficacy will be discussed in the final section concluding this chapter.

4.7 Limitations to the Findings

The findings that have been discussed within this section undoubtedly show in favour of workplace coaching overall and with several alignments to the efficacy of workplace coaching for mental well-being with specific parameters around suitable placement. However, there are some considerations that need to be

noted. Within the demographic data, it was noted that participants were self-selected and biased in age towards those aged 36-55yrs, this will undoubtedly have influenced the results and therefore the generalisability of the findings to other age-groups, furthermore, the self-selected nature of the participants could have meant that they were more motivated to improve their well-being. By asking coaches about their opinions of the efficacy of coaching, results are likely to be skewed in favour, similarly, asking people who have had a positive experience of coaching (and self-selected to join the programme), they are also likely to provide favourable answers. It is also possible that, while the coaches and coachees were asked if they had undertaken coaching outside of the intervention, they could have been undertaking self-coaching either consciously or sub-consciously. Data on this unfortunately, was not obtained but would present an interesting area for further research.

The data relies on self-report measures which have been criticised for their validity and interpretation, indeed, Sandvik, Diener and Seidlitz (1993) suggest there may be greater reason for scepticism in utilising self-report in personal well-being measures as: *"It is possible that society imposes strong norms concerning the social desirability of happiness that are less of a problem for other constructs such as extraversion. To claim to be happy may be the ultimate assertion of success in our society, and to admit unhappiness could be the single greatest summary of failure in life that an individual could concede"* (p. 318). The issues with self-report measures can to some extent be overcome by cross-correlating the data and combining it with other measures e.g. a semi-structured interview.

When the research was designed, it could not be foreseen that all coaching experiences would be positive and therefore, there is an imbalance in the feedback as undoubtedly, negative coaching experiences would not have found in favour of the efficacy of coaching. This is an interesting result that contributes to the growing evidence that coaching is indeed an effective methodology for improvements to well-being. What is more interesting is that this research has discussed the causal mechanisms of efficacy throughout each of the research questions. This section has found that both the experiences of being coached and the outcomes that are gained as a result, contribute towards a perceived efficacy by participants but when it comes to workplace coaching, the recognition of coaching as an intervention for improving mental well-being, is not always realised.

4.8 Conclusions and discussion: The efficacy of workplace coaching on the mental well-being of participants?

This chapter has outlined the results of mixed methods research with 51 participants who took part in a coaching for well-being programme/well-being coaching sessions. Findings have been discussed and analysed in light of three research questions: does participant's well-being change? What changes to well-being take place due to the coaching? What are the causal mechanisms by which changes to well-being take place? Both descriptive and parametric tests demonstrate that participants' well-being scores improve when compared to the control group and this is also true across a number of specific well-being

measures, with significant results for: *vitality; positive feelings; resilience and self-esteem; positive functioning; emotional well-being; resilience; autonomy; engagement and personal well-being*. It has also been seen that when comparing the coaches (including the control group who were also coaches) to non-coaches, well-being scores at the start of coaching were higher for the coaches compared to non-coaches. The implications of this result will be discussed in the next chapter.

The qualitative data considered the headline findings in more depth through the interviews and focus groups and found that akin to the quantitative findings, participants demonstrated changes to their *vitality, resilience and self-esteem, emotional well-being and some elements of positive functioning* (overall these elements form the majority of the components of personal well-being). Furthermore, that they also reported improvements to their physical, social and psychological well-being, well-being at work, plus considerations on whether they had a satisfying life (subjective well-being).

The final research question considered the causal mechanisms of the workplace coaching that contribute towards changes in well-being. This demonstrated through qualitative data that participants considered not so much the technique that was used but rather more, the outcome produced by different techniques that were the causal mechanisms for change, for instance, *identifying goals; reflecting; developing awareness; focusing on well-being, self-regulating and developing coping strategies* resulted in outcomes such as *well-being recognition; improved perspective; motivation; increased resilience and self-*

esteem; and goal clarity in summary these have been defined as the mediators of coaching efficacy. In addition to this, the qualities, attributes and structure of the coaching was raised as central within the coaching process, so factors such as having a “*professional conversation*”: *providing space and time to talk and be listened to within a supportive, collaborative environment*, all gave rise to impacting participants’ subsequent level of mental well-being.

The concluding question is whether workplace coaching is an effective way to improve mental well-being? Added to the research findings already discussed, participants were asked about their opinions related to the efficacy of workplace coaching for improving mental well-being. Regardless of whether the outcome was a change to well-being, participants reported high levels of coaching efficacy: “*It’s been brilliant, honestly, I really do, it has been really useful*” (CEE3). Others reported it as more useful than other training: “*I’ve really taken an awful lot from the coaching*” (COA6). Furthermore, it has been suggested that well-being coaching in particular was more effective than other interventions e.g. counselling:

“I think the well-being [coaching] was more structured for me to actually put positive structures into my own life to sort myself out and take responsibility for myself, whereas when I’ve had counselling, it’s just been, talking really and perhaps sorting the reasons why things happen in my life but not going forward, whereas the well-being is more going forward” (CEE9).

It has also been more effective than expected for some, would be recommended to others, and would be considered again by several participants if they wanted to improve their mental well-being:

“I think because of what I wanted to achieve, it was very effective. At the third meeting we had, we were both so pleased with what I had achieved, because we really did set some targets to achieve very

quickly...And by the time I went to the third, I was like, yeah I am completely sorted, ...So yeah it really really worked for me yeah, so very positive and I was saying to people, you should go and do this...I honestly can't tell you how much my life has changed in the past 6 months, really positively" (CEE14).

As can be seen above, participants demonstrate in favour of the research findings, reporting high levels of coaching efficacy especially related to well-being outcomes, however, these are, of course, subjective by nature and as discussed in the limitations to the findings, potentially biased. Therefore, they don't necessarily conclude that workplace coaching is an effective way to improve mental well-being, this question can only be answered by considering all three research areas overall. Based on these findings, conclusions can be made that:

- (a) Significant improvements in well-being outcomes resulted from the coaching (*vitality, positive feelings, resilience and self-esteem, positive functioning, emotional well-being, autonomy, engagement and personal well-being*) are made in relation to participation in coaching;
- (b) Participants consider that in addition to the above, coaching results in positive outcomes concerning: *satisfying life; well-being at work; social well-being*. This implies that participants have a more positive outlook about their personal, workplace and social well-being following coaching (even though the reality may prove otherwise);
- (c) The person-centred focus to coaching implies greater success in personal well-being outcomes;
- (d) Coaches were found to generally have a high level of well-being implying that being a coach was in itself favourable for well-being outcomes;
- (e) Coaching efficacy is underpinned by a process involving several important mechanisms for change (*develop awareness; identify solution-orientated goals;*

develop strengths and coping strategies; critically reflect; focus on well-being, self-regulate;

(f) The mediators of coaching include: *a change in well-being recognition; perspective; goal clarity; resilience and self-esteem; and motivation*, which are also important considerations in terms of coaching efficacy;

(g) The qualities, attributes and structure of the coaching are important for its success i.e. factors associated with the key stakeholders: the coach; the coachee and the workplace.

Therefore, the conclusions considering each of the key findings are that coaching is effective to result in positive changes to well-being primarily because the process of coaching results in several well-being outcomes together which come under the definition of mental well-being, but perhaps more importantly, because the causal mechanisms of that change are fundamentally part of a coaching process.

The evidence relayed throughout this chapter has made a number of important contributions to the literature. Primarily, it has added to the existing literature demonstrating a positive impact of coaching on well-being. It has also developed the literature into the causal mechanisms of change identifying several key areas of well-being that have been impacted by the coaching. Fundamentally, it has explored the relationship between the causal mechanisms of coaching and its impact on subsequent improvements to well-being. The next chapter will discuss these findings in relation to existing literature and the implications of these for theoretical and practical considerations.

Chapter 5 – Discussion

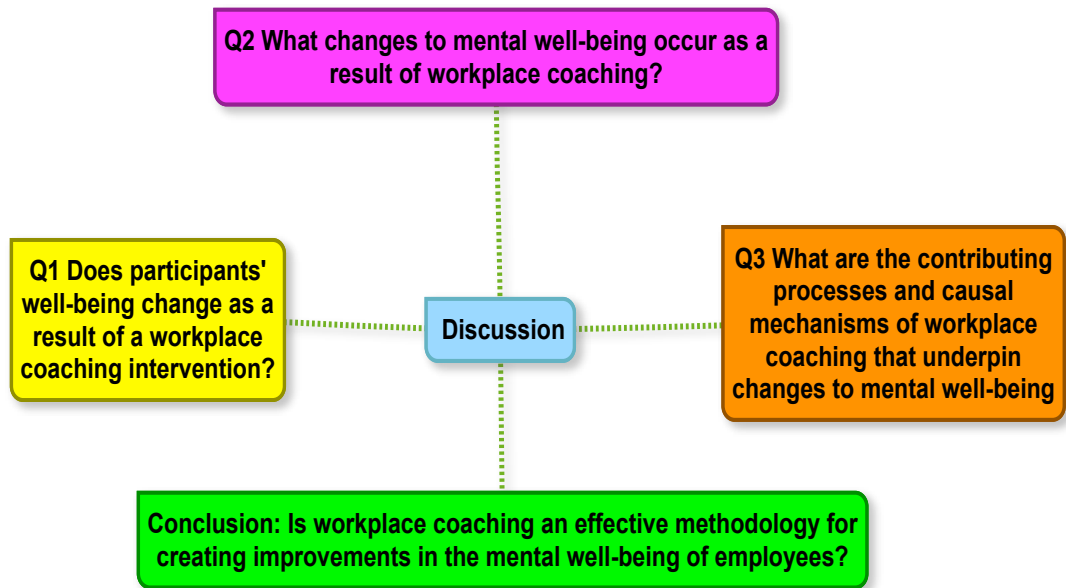


Figure 36: Mind map overview of discussion chapter

“The only true wisdom is in knowing you know nothing”

Socrates

5.0 Introduction

The previous chapter has outlined the findings from the mixed-methods research that has been undertaken as part of this research project. The aim of this chapter is to now discuss those findings in light of the existing literature, considering whether the results are in accordance with existing literature or whether there are new contributions to the literature. It will also look at whether the results are reliable, where the findings may be different to what was expected and also how the findings address the gap in the existing literature.

The nature of the research methodology offers an opportunity to consider the causal mechanisms that lie behind and are responsible for the findings, these will be highlighted in this chapter by taking a holistic view of the findings in relation to both the qualitative and quantitative findings and with reference to existing literature.

5.1 Addressing the Research Questions

The three research questions (Fig. 36) have been addressed in the previous chapter in relation to the findings, they will now also be considered with regard to previous literature and in light of the overall conclusions to be made about whether coaching is an effective methodology for creating improvements in the mental well-being of employees.

5.2 Does participants' well-being change as a result of a workplace coaching intervention?

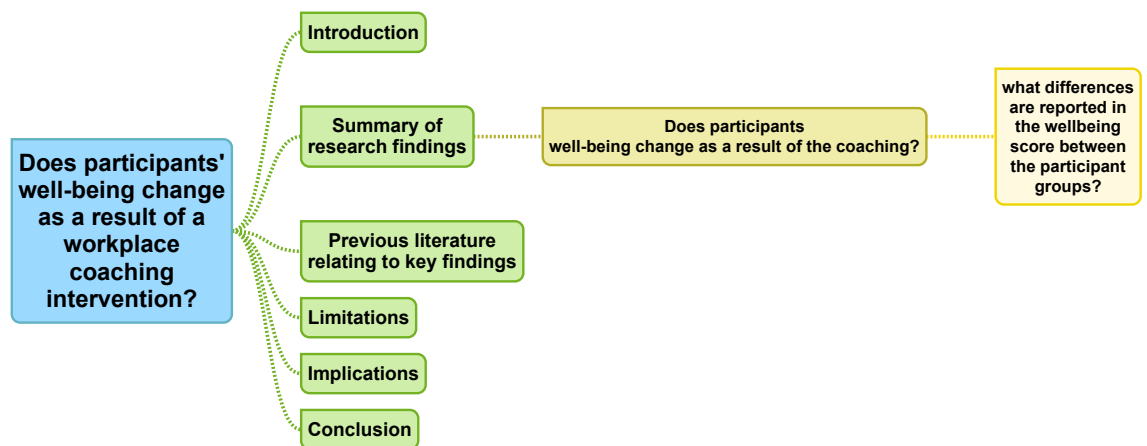


Figure 37: mind map overview of content of section on participant well-being changes

5.2.1 Introduction

The methodology considering this research question predominantly took the form of quantitative methods which considered whether participants who took part in the coaching programme experienced a change in their well-being as measured by the National Accounts of Well-being survey and compared to a control group.

5.2.2 Summary of findings

Does participant well-being change as a result of coaching?

Similar to other research (e.g. Green, Oades, and Grant, 2006; Spence, Grant, 2007) participants who took part in the coaching intervention demonstrated an improvement in their well-being score and this was across all areas of their well-being scores overall from T1 – T2. This was compared to the control group who experienced an overall reduction in the well-being scores over the same period.

The change in well-being score was significant as tested using a One-way Anova test with a score of .005.

Participants were also asked at several time points over the course of the coaching programme, how they would score their mental well-being on a 0-10 scale. The results of this demonstrated an overall increase from an average of 7.12 to an average of 7.85. Interestingly, the well-being score was lower in the score taken at the start of each coaching session scores compared to the post coaching scores and this pattern was repeated for each of the three coaching sessions, implying that the coaching session had an immediate and positive impact on how they rated their well-being, but also that participants' well-being dropped in between the coaching sessions. Of course, scores of this type are inherently subjective and could be open to the Hawthorne effect⁵.

The question concerning the change to participants' well-being demonstrates a clear improvement. The second question is whether this is due to the coaching? While results cannot be absolute due to the impact of mitigating factors, the differentiation between the participant and control groups seems to demonstrate causality. However, it should be clarified that the coaches could have incurred an improvement due to the overall coaching for well-being programme rather than just the coaching only element. In this respect, the inclusion of the coachee group helps to support the findings that well-being improves as a result of coaching,

⁵ The Hawthorne effect refers to an improvement in participant results produced by the "psychological stimulus of being singled out and made to feel important" (Franke and Kaul, 1978).

although the inclusion of the full coaching for well-being programme adds evidence that contributes to the “how” and “why” which will be discussed in the subsequent two questions.

What is the difference in the changes to well-being score among the participant groups?

The participants’ overall well-being results were also split according to the different participant groups. This demonstrated a difference in the score for the coaches group whereby, while coaches had the highest well-being score at the start and end of the programme, there was a significant difference between the two groups with the non-coaches improving their well-being score to a greater extent than the coaches (which was also the case when including the control group who were also coaches).

5.2.3 Existing literature

The next section will consider the existing literature in relation to the research findings that explore whether workplace coaching improves the mental well-being of individuals. In particular, it will cover two areas: Does participants’ well-being change? And, what differences are reported in the well-being score between the participant groups? Figure 38 provides an overview of each of the key areas which will be discussed in light of these areas.

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

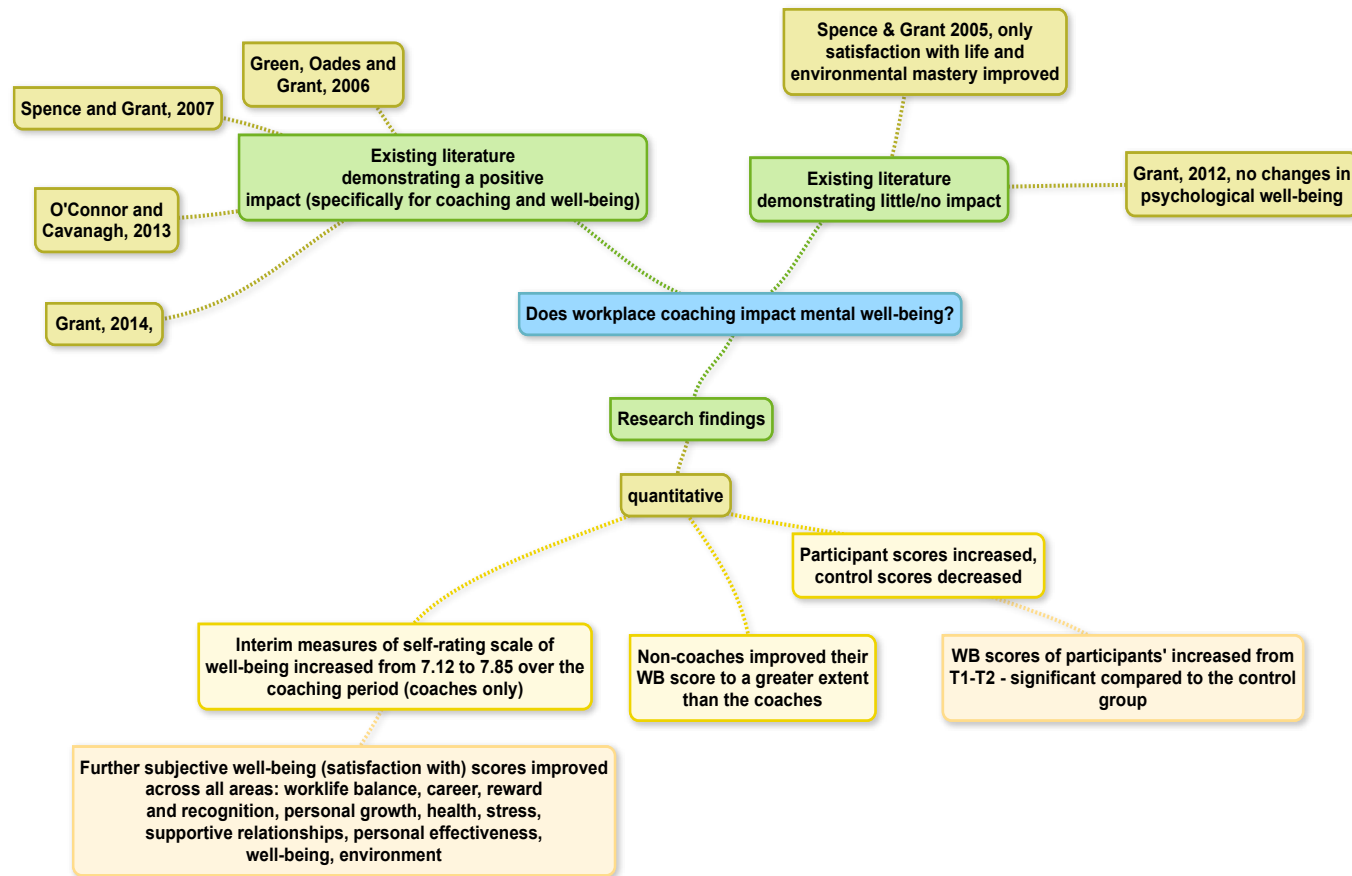


Figure 38: Mind map overview of comparison of findings compared to existing literature of the impact of workplace coaching on mental wellbeing

Does participant well-being change as a result of coaching?

While there is some existing literature demonstrating a limited or no impact of coaching on well-being, the majority of the research relating specifically to the impact of coaching on well-being, demonstrates a positive impact. The findings of this research are in alignment with this existing literature which has also demonstrated the effectiveness of coaching on well-being and associated outcomes e.g. enhancing psychological and subjective well-being (Green et al., 2006; Spence, Grant, 2007). A Meta-analysis by Theeboom, Beersma, and Van Vianen (2014) focused on coaching effectiveness in an organisational setting demonstrated a significant effect of coaching on well-being outcomes with an effect size of .46. Similarly, a systematic review conducted by Grover and Furnham (2016) also suggested that the majority of research examining well-being has been positive.

Existing research explains changes in well-being according to general well-being e.g. psychological well-being as measured by the Scales of Psychological Well-being (Ryff, 1989) or the Positive and Negative Affect Scale, or more specifically according to the item measured e.g. life satisfaction as measured by the Satisfaction with Life Scales, or Workplace Well-being Index. The intricacies of well-being will be discussed within the next research question however it is worth noting that whether coaching is regarded to impact well-being according to existing research depends largely on the focus of the research. For instance, if one looks solely at the number of studies specifically researching the impact of coaching on personal well-being, there are currently just nine studies (See Table 11 below: Spence and Grant, 2005, 2013; Green, Oades and Grant, 2006; Grant, 2008, 2013, 2014; O'Connor and Cavanagh, 2013; Green et al., 2014; Dulagil,

Green and Ahern, 2016). However, there are several more studies which take into account wider components of well-being whilst not necessarily researching well-being in its own right e.g. resilience is argued by Michaelson, Abdallah, and Steuer (2009) to be a part of well-being, yet Grant, Curtayne, and Burton (2009) measured resilience in its own right according to an 18 item version of the Cognitive Hardiness Scale (Nowack, 1990) and not as part of well-being. The qualitative evidence alongside these findings are useful as they identify some discrepancies between whether a participant views their well-being as changed.

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

Study	Population/Intervention overview	Type of study	Key findings	Notes
O'Connor, & Cavanagh (2013)	AB design coaching intervention study conducted across organisation. 20 leaders received 8 coaching sessions over 16-20 weeks period.	Repeated measures control period AB design. (a) coaching group (b) all others in the network. Measures at baseline control, pre and post coaching intervention.	Significant increase in goal attainment, transformational leadership and psychological well-being from coaching. The closer any member of the network was identified as being connected to those who received coaching, the more likely they were to experience positive increases in well-being. Decline in perceived quality of interaction others believed they were having with those who were coached.	Psychological Well-being Scale (PWB) scale
Spence & Grant (2005) (phase 1 of study)	Aims to replicate the study of Green, Oades, & Grant, (2003; 2005) and extend it through inclusion of 1-2-1 coaching.	64 participants allocated to Professional, peer or waitlist control group. SF-CBC approach with 10 weeks of coaching and information evening. Peer coaching attended 1 day workshop and then 10 weeks 75mins co-coaching sessions	Increased levels of goal attainment, satisfaction with life, perceived control over environmental factors, greater orientation towards new experiences, behavioural and cognitive flexibility. Better results for professional coaching and goal attainment over peer coaching. Less impressive findings for well-being – only satisfaction with life and environmental mastery improved. Low impact on mental health and personality.	Satisfaction with Life Scale (SWLS), Positive and Negative Affect Scale (PANAS)
Spence & Grant (2007)	63 adults (community sample) took part in SF-CB life coaching programme	Randomised controlled study (a) professional coaching group (b) peer coaching (c) waitlist control group	Professional coaching more effective in increasing goal commitment, goal attainment and environmental mastery	Subjective Well-being (SWB), SWLS. Scales of Psychological well-being (SPWB) Ryff, (1989)
Grant (2012)	within-subjects (pre-post) coaching study, 49 mature age coachees set personal goals and completed a 10-week to 12-week, five-session, SF-CB personal coaching programme using the GROW model	Within subjects	Coaching programme appeared to be effective and successful in helping the clients reach their desired outcomes, significant increase in goal attainment following coaching programme, sig decreases in anxiety and stress. No changes in levels of depression or psychological well-being	18 item psychological scales (Ryff & Keyes, 1995), Self Reflection Insight Scale (SRIS), Goals focused coaching skills questionnaire (GCSQ)

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Study	Population/Intervention overview	Type of study	Key findings	Notes
Grant (2014)	Within subjects study, 49 coach-coachee dyads conducted 4 coaching sessions over a 10-12week period	Randomised controlled study	Results indicate that satisfaction with a coach–coachee relationship does not predict successful coaching outcomes, and whilst autonomy support and proximity to an ‘ideal’ relationship moderately predicted coaching success, a goal- focused coach–coachee relationship was a unique and significantly more powerful predictor of coaching success. The changes were significant in PWB for a one-tailed t-test	PWB 18 item, SRIS
Green,Oades & Grant (2006)	56 adults (community sample) took part in SF-CB life coaching program	Randomised controlled study (a) group-based life coaching (b) waitlist control	Coaching increased goal attainment, well-being and hope. 30 week follow up found gains were maintained	SWLS, PANAS
Grant (2008)	29 coaching psychology students (adults) took part in a (SF-CBC) life coaching programme	Within-subjects design (coach and coachee)	“Participation resulted in: reduced anxiety, increased goal attainment, enhanced cognitive hardiness and higher levels of personal insight, higher end-of-semester . There was no change in participants’ levels of psychological well-being”	SPWB
Green et al., (2014)	73 High school students randomly assigned to CB-SF coaching group; Positive Psychology Intervention Group; Control group.	Randomised controlled design	Participation in PPI group yielded favourable results for well-being, the CB-SF coaching group did not result in a positive change. Changes were not sustained at 9-month follow-up.	Warwick Edinburgh Mental Well-being Scale (WEMWBS)
Dulagil, Green and Ahern (2016)	25 High school students took part in a coaching program as part of a broader positive education programme within the school	Within-subjects design	Participants showed significant increases in well-being, total trait hope, cognitive hardiness and a significant decrease in depression, anxiety and stress.	WEMWBS

Table 11: Overview of key findings of existing literature relating to the impact of coaching on personal wellbeing

In the research for this thesis, participants were asked in the interviews about their expectations of whether their well-being had increased/decreased/stayed the same, this was then compared with their resulting score. A few of the participants expected an increase in their score when it actually decreased and one participant expected the drop in their well-being due to a personal situation: *“I am pretty sure that things stayed pretty more or less the same until the big piece of news”* (COA4).

However, the results did highlight that upon discussion, the majority of participants resonated with their results and felt they were an accurate reflection of their well-being *“Oh, that’s brilliant, I am really pleased about that, I was thinking deep down that I’ve really improved”* (COA7). Or participants were surprised that they had increased their score as much as was reflected: *“I’m quite surprised in a way that a lot of things have gone up, I wouldn’t have thought it would have gone up quite dramatically over all the areas”* (COA5). Similar results were also reflected with the coachees: *“I think that’s really interesting, I think there have been huge improvements, there’s no question”* (CEE19).

This does highlight some interesting points about how participants take into account considerations about their well-being, what impacts upon their rating and what they consider is part of well-being. For instance, more than one participant felt that their well-being score hadn’t changed when their results demonstrated an increase and interview discussions outlined several “well-being components” (feelings of overwhelm, resilience and confidence) had improved and yet the participant did not mention these points when stating that they thought their well-

being had stayed the same (CEE3). This implies that education⁶ and self-awareness are important aspects of the validity of research findings related to self-report measures and interviews.

In summary, participants well-being has been demonstrated to change as a result of the coaching and this was pertinent to both the coach and coachee results. While some previous literature has found this not to be the case, the findings of this research align with those by Green, Oades and Grant (2006); Spence and Grant (2007); O'Connor and Cavanagh (2013); and Grant (2014) that coaching does result in improvements to participant well-being.

Differences between participant groups for coaching effectiveness

While coaching research has been undertaken with a variety of participant groups (teachers, managers, leaders, students, etc) there is a surprising lack of empirical research that considers the efficacy of coaching on these different participant groups and little research that uses coaches as a participant group themselves. Grant (2014) explored components of the coach-coachee relationship in a within-subjects study utilising coaching psychology students and in (2008) researched personal life coaching for coaches in training which resulted in enhanced goal attainment, insight, reduced anxiety and enhanced cognitive hardiness, however to the researchers knowledge, there is no other primary research relating to well-being outcomes of coaches. Leedham (2005) carried out a case study of an

⁶ participants were asked at the start of the interview if they were comfortable with the term “mental well-being”, which was also clarified and the coach group were given specific training about the definition and components of mental well-being.

internal coaching intervention that was aimed at building leadership capacity. He found that there were many benefits both direct and indirect when the manager was trained and acted as the coach. While it may be unreasonable to expect all organisations to train their staff as coaches, the comparative findings here of the benefits to being a coach may begin to add further evidence to the benefits of coaching as a central part of an organisations effectiveness. Conversely, it would be a shame to see groups of people excluded because they don't fit the criteria for return on investment. Having said that, limitations to coaching efficacy will be discussed later in this section which includes the appropriateness of coaching for different situations.

What is more pertinent to discuss within the findings of this section are the personal qualities that are gained as a result of coaching that may lead to higher well-being and subsequently higher levels of coaching effectiveness. Thus, it may be that coaches have higher well-being scores before any intervention because they self-coach or have gained the personal qualities already from their coach-training and practice and that the reason for the improvement in their score was that these qualities were further enhanced and embedded. The particulars related to the qualities will be discussed in the next section which explores the changes associated with improved well-being.

5.2.4 Limitations

This section has considered whether participants' well-being changed as a result of workplace coaching. While it has aimed to overcome some limitations such as participant bias in the self-report measures and interviews by combining

methods, not all limitations can be overcome. Different participant groups have been recruited whilst remaining within the parameters of the workplace which offers some replication of these results to wider workplaces. However, it should be acknowledged that one of the participant groups was a team of coaches who undertook a fuller coaching for well-being programme. The question of causality of the coaching versus the training becomes apparent and was in some ways overcome by the use of participant groups who didn't receive the training and was designed in order to overcome other limitations such as a lack of understanding about mental well-being. Further limitations with the participants and especially the coaches is that they may present a more positive outlook about the benefits of coaching and its effectiveness, participants may have also felt an obligation to improve their well-being. Further research to replicate this design would help to assess the impact of this. However, the focus of this thesis is not only whether well-being changes, but the efficacy of workplace coaching to facilitate that change and the causal mechanisms responsible. By considering the findings in light of the varying research questions, biases can be overcome to some extent by the process of retrodution that considers the importance of inferences about the causal mechanisms of the findings and this has usefully been enabled by comparing the mixed methods of research.

5.2.5 Implications

There are several implications highlighted here as contributions to the literature of not only coaching efficacy but also the intervention that can be used to contribute towards human flourishing. The findings present further evidence that workplace coaching impacts positively upon mental well-being of employees and

should be considered by workplaces as part of their well-being interventions. While these findings are not necessarily replicable outside of the workplaces to which the research took place, there is now a wider contribution on the context of this topic that suggests that generalisation can be made about the overall efficacy of workplace coaching for mental well-being. The application of this methodology needs to take into account the limitations which focus heavily upon the recognition of the workplaces as to the appropriateness of this intervention for different situations e.g. level of mental health, the relationship match between the coach and coachee and the opportunity for employees to receive workplace coaching.

Furthermore, this research has been the first (to the researcher's knowledge) to specifically consider the impact of coaching on mental well-being of coaches as well as coachees. This has demonstrated that the qualities and attributes of the coach are greater determinants of a higher level of well-being at the start of coaching and a subsequently greater level of well-being at the end of coaching, although the coachees had the greatest improvement overall. It may be worth considering future research that compares the determinants of workplace coaching efficacy and compare them to ratings by coaches to see if these are reasons for higher well-being scores.

5.2.6 Conclusion

In alignment with previous research, coaching has demonstrated a positive intervention to impact well-being with significant increases in the participant group when compared to the control group. It has also highlighted several areas that

contribute towards coaching efficacy including the experience and outcomes of coaching and the positive benefits of being a coach. In summary therefore, it has to be concluded that coaching has once again been demonstrated to promote favourable well-being outcomes and should be considered amongst individuals and workplaces to be part of enhancing workplace well-being. That said, there are several underlying mechanisms and defined well-being outcomes that are found within these results and these will be considered in the next two questions.

5.3 What changes to mental well-being occur as a result of workplace coaching?

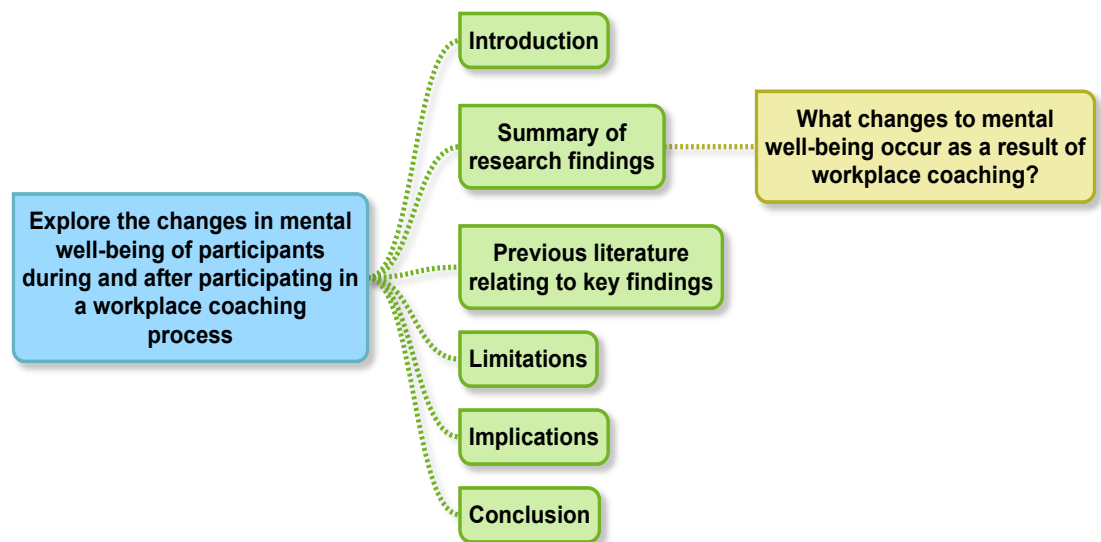


Figure 39: Mind map overview of the content of this section

5.3.1 Introduction

This section will consider the findings and existing literature in relation to the research objective: explore the changes in the mental well-being of participants; during and after participating in a workplace coaching process. Both qualitative and quantitative data was gathered in respect to the research questions, the main findings of which are reflected in Figure 40 below.

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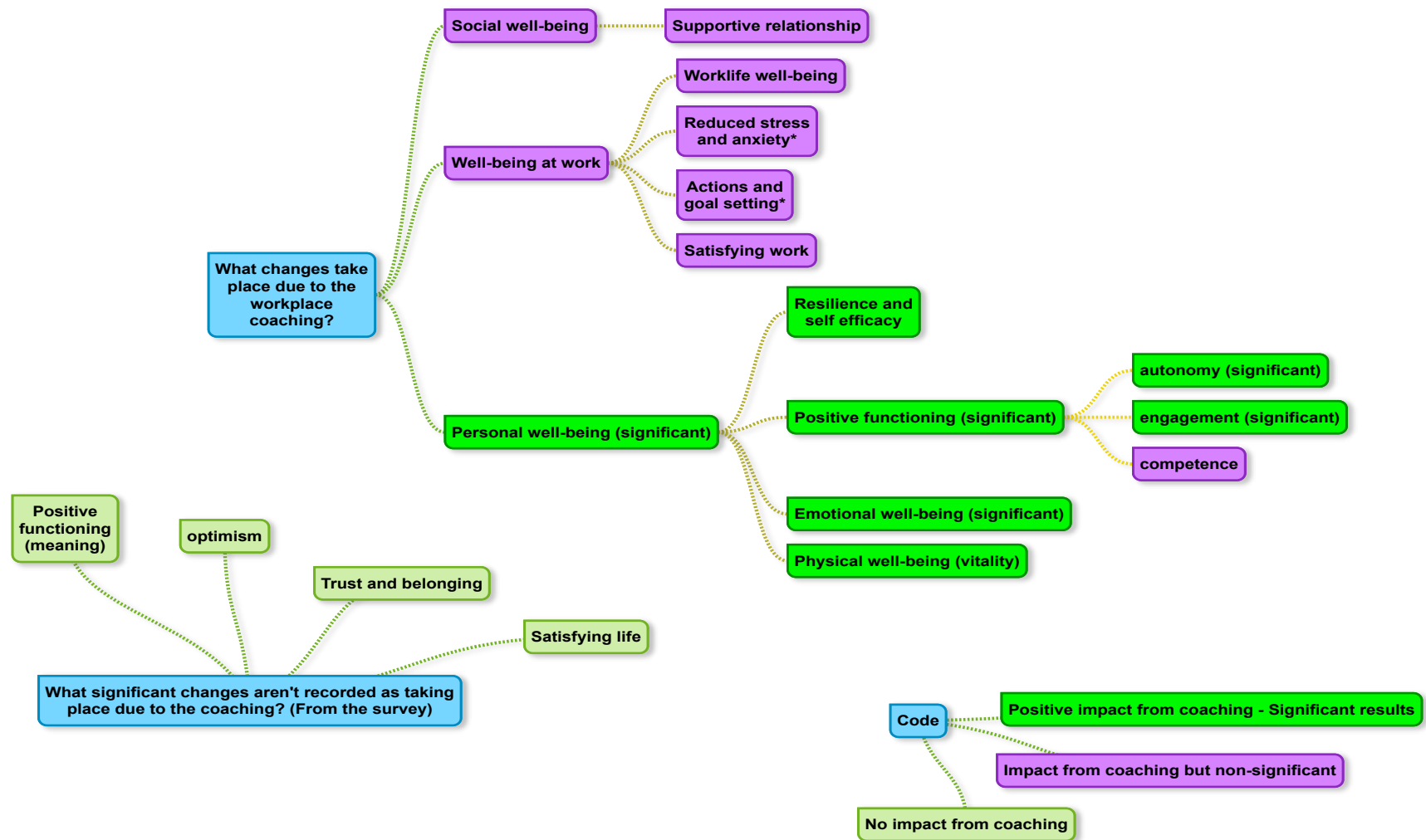


Figure 40: Mind map overview of main research findings pertaining to the changes that take place due to workplace coaching

5.3.2 Summary of the research findings

As was discussed in the previous section, the overall quantitative findings from the National Accounts of Well-being Survey demonstrated an improvement to the well-being of participants when compared to the control group. The results have been separated into Personal Well-being (including emotional well-being); Social Well-being and Well-being at work.

The key findings have been considered in terms of both significant quantitative data and corresponding qualitative findings. These findings suggest that in addition to participants improving their well-being overall, they also exhibited changes to their personal well-being including the following areas: *positive functioning (autonomy and engagement), physical well-being (i.e. vitality); resilience and self-esteem; and emotional well-being.*

Non-significant improvements in well-being were seen for the participant groups for the following areas however the qualitative data suggested that coaching did impact changes in these areas: *supportive relationships, absence of negative feelings, competence, well-being at work (improved work-life well-being; reduced stress/anxiety; actions and goal attainment; satisfying work).*

There were a few areas where the quantitative data demonstrated an improvement but this was non-significant and the qualitative findings furthermore did not demonstrate findings to the contrary, therefore it is found that coaching did not significantly impact the following components: *satisfying life, trust and belonging; optimism; meaning.*

5.3.3 Existing Literature

There is growing evidence of systematic reviews demonstrating the efficacy of coaching (e.g. Grover and Furnham, 2016), what is lacking in these reviews is an in-depth outline of specific individual well-being outcomes related to coaching. Figure 41 outlines the main outcome research between coaching and well-being. What is apparent is that while the evidence as to the impact of coaching on well-being is positive, there are still some mixed results on the outcomes, with half of these key studies presenting little or no change to well-being measures. None of these studies utilise the National Accounts of Well-being Survey so a true comparison cannot be made to the research conducted for this thesis, however the next section will consider the break-down of these measures and relevant literature.

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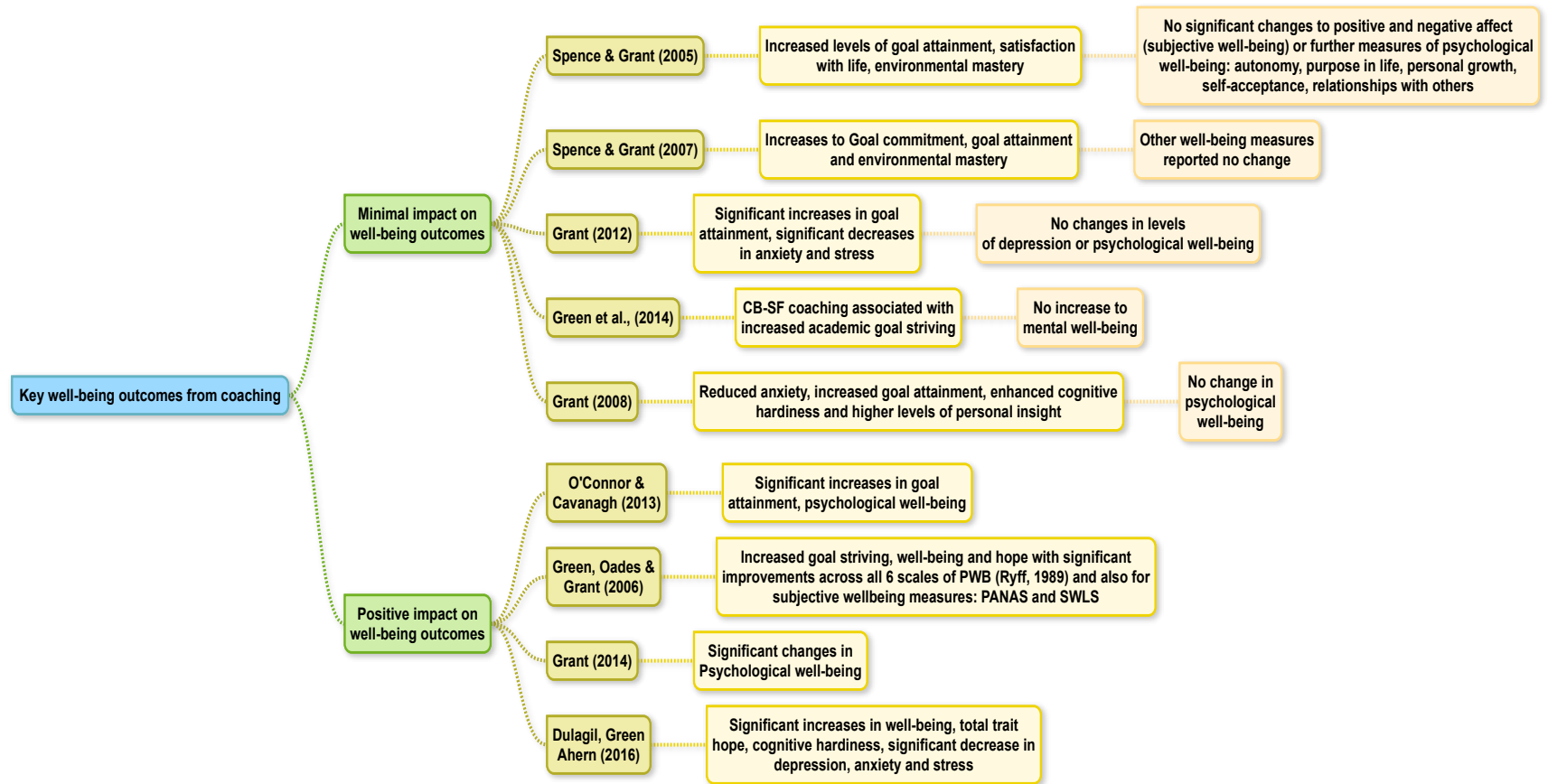


Figure 41: overview of the key wellbeing outcomes from coaching (existing literature)

5.3.3.1 *What components of well-being are included within the measures*

Mental well-being has been defined by Dewe and Kompier (2008, p. 7) as: “*a dynamic state in which the individual is able to develop their potential, work productively and creatively, build strong and positive relationships with others, and contribute to their community. It is enhanced when an individual is able to fulfil their personal and social goals and achieve a sense of purpose in society*”.

While there is no consensus about what constitutes mental well-being, there is evidence that well-being contains both hedonic (happiness) and eudemonic (flourishing) dimensions. Research from the European Social Survey found a high correlation ($p=.65$) between the two types of well-being meaning that people who score high in terms of hedonic well-being also tend to score high on eudemonic well-being, but they also found that the two concepts are distinct from one another (European Social Survey, 2015).

It has also been argued by Michaelson et al. (2009) that well-being is constructed of: emotional well-being, satisfying life, vitality, resilience and self-esteem, positive functioning, supportive relationships and trust and belonging. This data has contributed to the National Accounts of Well-being Survey and to the items within the Personal and Social Module for the European Social Survey. Using theoretic models and statistical analysis, six key dimensions of well-being were identified (relevance to the above measures included in brackets, where not explicit): evaluative well-being (satisfying life); emotional well-being; functioning (incorporating resilience and self-esteem, plus: competence, engagement,

meaning, purpose, optimism); vitality; community well-being (trust and belonging); supportive relationships.

While the above definitions have been included within the literature review, they are reinforced here in order to determine the efficacy of coaching on mental well-being and whether they fall within the definition and measurements of mental well-being. The National Accounts of Well-being measures will be adopted in order to determine the comparison of the research findings to the exiting literature whilst findings outside of these measures will be considered in light of other research as relevant.

While there is growing evidence about the impact of coaching on a number of outcomes, including well-being, such as workplace stress reduction (Wright, 2007); goal attainment, reduced anxiety and stress (Grant, 2003; Green, Grant, and Rynsaardt, 2007), enhancing psychological and subjective well-being (Green et al., 2006; Spence, Grant, 2007) and improving resilience (Grant et al., 2009), these take a rather broad view of well-being and for instance, while stress reduction is related to well-being, it doesn't fall within the remit of well-being. The following studies measure components of well-being such as resilience, workplace well-being, quality of life or stress reduction. These studies have been identified as either, the researcher referred to well-being outcomes, or they aimed to reduce stress. The latter has been included because, while stress reduction is not specifically a well-being outcome, it is often linked to measures of well-being e.g. PANAS, and some researchers will include both elements of the positive elements of well-being as well as the negative elements of stress, anxiety

and depression (e.g. Grant, 2012). These studies are useful because while Figure 41 presents a clear overview of the most relevant studies, the ones included below (Fig. 42) provide useful contributions about the components of well-being that are gained from coaching interventions:

Studies related to well-being components

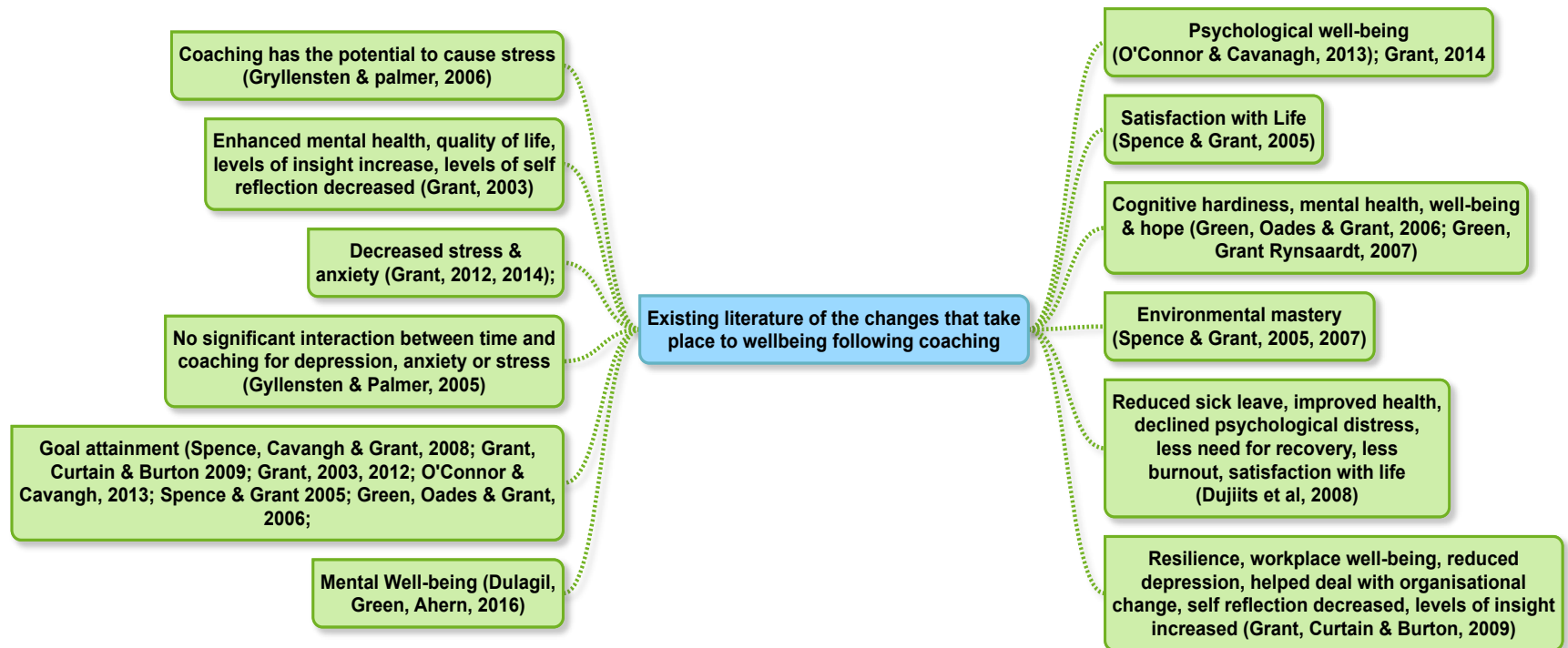


Figure 42: Overview of the existing literature detailing the changes that take place to wellbeing as a result of coaching

5.3.3.2 *Discussion of key findings: Personal Well-being vs Social*

Well-being

Comparing the findings with the literature, firstly, there was a better result for personal well-being compared to social well-being. Importantly, while data, for example within the European Social Survey (Round 6 - 2012/13) demonstrates that respondents who score high on one dimension of well-being tend to score high on other well-being dimensions, this is not always the case. Disappointingly, the ESS data has not yet compared the data to assess the changes between the rounds however, the importance of displaying the difference between related but distinct dimensions of well-being has been highlighted in their report:

“Analysis of data from Round 6 of the ESS reveals that hedonic and eudemonic well-being are two distinct concepts reflecting different theoretical aspects of subjective well-being. These two distinct concepts are, however, highly correlated and cross-national comparison shows that most countries reporting high hedonic well-being also report high levels of eudemonic well-being” (Vanhoutte, 2015)

The difference in the ESS scores for Personal and Social well-being has yet to be explained within existing literature, but fundamentally, the social well-being questions relate to a subjective assessment about how the participant views their relationships and feeling of trust and belonging e.g. *“do you have anyone with whom you can discuss intimate and personal matters”*. While a goal of coaching may be to improve personal relationships, this isn't necessarily within a participants' control. Coaching places an important emphasis on facilitating goal achievement within the coachee's own life (not someone else's) and this may account for the difference.

Physical well-being (Vitality)

Participants also experienced an improvement in vitality; It has been argued by Spence and Oades (2011) that coaching that is supportive of a coachee's basic psychological needs is likely to result in a greater or renewed sense of energy (consistent with Deci and Ryan (2008) findings about subjective vitality). While there has not been empirical evidence to demonstrate this well-being outcome specifically, the results here demonstrate a significant change to the vitality of participants compared to the control group and this is similar to studies into mindfulness (e.g. Canby et al., 2015) and positive mental training (Ross, 2014) which also demonstrate an improvement to vitality scores.

Emotional Well-being

Emotional well-being (including positive feelings) has also been highlighted as a key change from the research and this has been demonstrated both in the survey results and in the interim brief measures which showed a temporary change in well-being as rated by a 0-10 score before coaching (7.12) raising immediately after coaching (7.85). There are similar findings within existing literature, for instance: Green et al. (2006) found that participation in a life coaching group programme improved both subjective well-being (as measured according to the Positive and Negative Affect Scale and Satisfaction with Life Scale) and Psychological Well-being (Scales of Psychological Well-being). Similar results are replicated by Grant (2003; 2014); Green et al. (2007); Gyllensten and Palmer (2005); and O'Connor and Cavanagh (2013). It therefore seems that coaching predominantly has a positive impact on feelings. The results related to reducing negative feelings are less conclusive, despite there being a reduction in negative

feelings in the participant group and an increase in negative feelings for the control group (a pattern that was also applicable to emotional well-being overall), the results of this study were non-significant. This is interesting because other studies which have focused more on negative affect, stress, anxiety and depression have also found similar non-significant results (e.g. Gyllensten and Palmer, 2005), while studies as above focusing on positive affect, well-being and enhanced well-being tend to demonstrate more favourable results.

Theory (e.g. Huppert, 2008) has demonstrated the importance of considering the two spectrums of stress, anxiety etc compared to well-being and flourishing and when comparing these areas to the impact of coaching, the evidence seems to reinforce better results in the areas focusing on flourishing and positive mental well-being rather than ill-health and stress. This is similar to findings by several other researchers (e.g. Grant, 2012; Grover and Furnham, 2016; Jones, Woods, and Guillaume, 2016; Theeboom, Van Vianen, and Beersma, 2017) who found that enhanced emotional functioning as well as goal attainment and reduced stress were enhanced by facilitated coaching approaches (for example solution focused) as opposed to pressure-based (problem-focused) approaches. This suggests that coaching may be more effective as an intervention for increasing positive affect e.g. well-being rather than reducing negative affect e.g. stress.

Positive Functioning

Positive functioning as measured in the National Accounts of Well-being Survey includes autonomy, competence, engagement, meaning and purpose. Of these, engagement and autonomy had a significant improvement in the participant

group, meaning and purpose improved in both groups, while competence improved but wasn't significant for the participant group. Deci and Ryan (1985) have argued in their self-determination theory (SDT) that people are motivated by the fulfilment of three basic psychological needs (autonomy, competence and relatedness) and that the fulfilment of these can lead to enhanced self-motivation, mental health and well-being (Ryan and Deci, 2000). Furthermore, Spence and Oades (2011) suggest SDT to be a useful theoretical foundation for enhancing the coaching literature in that it satisfies the three basic psychological needs. According to the theory;

“people do well and feel their best when the socio-cultural conditions of their lives (i.e. family relationships, friendships, workplace culture, political system, cultural norms) support the innate needs of freely engaging in interesting activities (autonomy), producing valued outcomes via the use of their capacities (competence), and feeling closely and securely connected to significant others (relatedness)” (Spence and Oades, 2011, p. 42).

Autonomy

Autonomy is described by Ryff (1989) as relating to independence and self determination or more simply, Michaelson et al. (2009) describe it as *“feeling free to do what you want to do and having the time to do it”* (p. 21). Within the literature, there is often a link between autonomy and goal attainment, for instance Linley, Nielsen, Gillett, and Biswas-diener (2010) aimed to understand how well-being outcomes could be achieved by using our strengths and whether or not using signature strengths helps us achieve our goals and whether this in turn results in improved well-being. The results showed that strengths use is associated with better goal progress and enhanced well-being. This is similar to earlier research showing that self-concordant goals (personally valued and

associated with autonomy, growth and connectedness) are specifically associated with greater well-being.

As has been seen in the results section and in the research outlined above, autonomy increased more in the participant group and this was significantly greater than the control group and this supports the literature especially around goal attainment (e.g. Spence, Cavanagh and Grant, 2008).

Models of cognitive behavioural coaching are underpinned by self determination theory and specifically aim to help coachees to develop autonomy by raising awareness of their beliefs and perceptions and replacing it with logical, evidence-based and pragmatic beliefs, ultimately becoming their own coach (Dias, Palmer and Nardi, 2017). Similarly, cognitive behavioural, solution focused coaching models have been linked to improvements in well-being and previous research suggests that goal attainment and autonomy (some of the mechanisms achieved through coaching) can buffer the impact of stressors on well-being (Daniels and Guppy, 1994).

Engagement

The quantitative results demonstrated a significant improvement in the score for engagement while the qualitative results also demonstrated an increase in motivation. Engagement is a key aspect of well-being theories with the widely used PERMA scale (Seligman, 2011) identifying it as one of the five measures of well-being. In spite of the widespread appeal of PERMA as a theory of well-being, there seems to be little empirical evidence of its application to the evidence

base of coaching and thus little evidence about the impact of coaching on engagement as an outcome. However, Madden, Green, and Grant (2011) carried out a pilot study using an evidence-based coaching programme with primary school students and found that on a self-report scale, students reported significant levels of engagement. Furthermore within the workplace Kombarakaran, Yang, Baker and Fernandes (2008) noted that within executive coaching, they perceived that coaching increased their personal engagement with their work and subsequent productivity.

Competence

Spence and Oades (2011) suggest that the Solution Focused (SF) approach widely used within coaching uncovers latent potential thus tapping into this need. *“SF coaching tends to orient people towards what they are doing well, things that are working, personal strengths/resources and their utilisation. The use of SF techniques can then be seen as an attempt to create conditions that foster feelings of competence”* (Spence and Oades, 2011). As has been seen (e.g. Green et al., 2006), several of the coaching models utilise a solution-focused approach with a cognitive behavioural design to a successful well-being outcome which implies that perhaps this theory is correct. Interestingly, the research undertaken for this thesis did not focus specifically on the SF approach and yielded less favourable results for competence, which perhaps adds credence to the use of the SF or CB-SF approach to coaching for this outcome.

Resilience and Self-esteem

The final area that was impacted significantly within the results is resilience and self-esteem. Green et al. (2007) and Gyllensten and Palmer (2005) suggest that coaching through the self regulation cycle helps participants build resilience and this links in to the above area considering the self regulation cycle includes evaluating progress towards goals. Green et al. (2007) study showed that life coaching was associated with significant increases in cognitive hardiness (suggested by Bonanno (2004) to be an important dimension of resilience). Grant et al. (2009) also found coaching to be associated with increased resilience. Therefore, resilience and self-esteem can be concluded to, in accordance with previous literature, be a resulting change from workplace coaching.

5.3.3.3 Workplace Well-being and meaning

The final two areas which also retained improvements across both groups of participants are *work* and *meaning*. The change in score for work for the control group was very minor (3.33 to 3.37) while the participant group increased from 3.65 to 4.11. The literature on workplace well-being rarely mentions coaching as an intervention that could be adopted although Grant et al. (2009) found that coaching increased workplace well-being. This lack of research is perhaps due to the infancy of coaching literature. Participants in the research presented here reported reduced stress/anxiety. There is empirical research related to workplace stress and coaching (Gyllensten and Palmer, 2005b) which found no significant interactions between time and coaching for stress, depression or anxiety. Similar findings by Green, Oades, and Grant (2006) found that significant

results were not found for stress, anxiety and depression following a coaching programme. However, Gyllensten and Palmer (2006) found that their quantitative results were non-significant, but in their qualitative analysis, participants reported that coaching reduced stress indirectly, by helping them to cope with stressful situations. This demonstrates the benefit of a mixed methods approach that can give more insight into the findings.

A report within the Foresight Mental Capital and Well-being Project (2008) focused on stress management and well-being interventions in the workplace and suggested that they consist of two approaches: person-oriented and work-oriented. Of the person-oriented approaches, they suggested that cognitive behavioural programmes combined with relaxation are most promising and furthermore, this is best when combined with work-oriented interventions.

Related to this is that work may form part of a person's "meaning" and Ryff (1989) describes mental health to include beliefs that there is purpose and meaning to life. Meaning has become a central part of well-being measures and positive psychology in particular, also reflected in the widely recognised PERMA scale Seligman (2018). It is therefore perhaps surprising that this result was not significant in that there is a core focus of coaching around goal setting based on a meaningful purpose. Possible reasons for this could be the emphasis on well-being over work or indeed the focus on personal well-being rather than work-related well-being.

5.3.3.4 *No significant impact of coaching on mental well-being*

While there is growing evidence about the efficacy of coaching on mental well-being, not all research studies demonstrate a positive impact on all well-being measures, Spence and Grant (2005) found that while coaching provided a benefit to those who received it, compared to those who didn't receive coaching e.g. measuring goal attainment, the results were less impressive for well-being, with only satisfaction with life and environmental mastery improving. This is unsurprising seeing as a key area of coaching involves goal attainment and similarly, previous findings by Diener (1984) which reported a strong relationship between goal attainment and life satisfaction. Interestingly, the only study that didn't demonstrate a significant increase in satisfying life was Spence and Grant (2007) (although, like this study, they did report a Time 2 increase). They argued that this result may be different to other studies because it was goal focused rather than aimed at enhancing well-being and they also screened for mental health problems, so it could have been a relatively 'happy' group.

These findings are similar to Yu et al. (2008) who also found a coaching intervention only resulted in one subscale change in well-being as measured by the scales of psychological well-being and only a change in positive affect as measured by the Positive and Negative Affect Scale. Furthermore, Gyllenstein and Palmer (2005; 2006) explored the impact of coaching and stress in the workplace and found that coaching did not reduce stress but was found to help participants indirectly by managing other work-related problems that were causing them stress. These findings are interesting and a useful demonstration

of the benefit of looking at the inferences that can be made between the differing evidence.

The areas of this research that resulted in a non-significant improvement in the participant group, included: *trust and belonging, meaning, optimism, and satisfying life*.

Trust and belonging

Social well-being is made up of trust and belonging and supportive relationships. Both of these results were according to the quantitative data, non-significant.

While the connection between supportive relationships and well-being has been established (e.g. Seligman, 2011), there is little research that explicitly looks at the impact of coaching on relationships as a well-being outcome. Kombarakaran et al. (2008) found an improvement in manager-relationships among the benefits of coaching, but more commonly, “relationships” is used as a measure related to stress due to its inclusion within the HSE stress indicator tool (see Mackay, Cousins, Kelley, Lee, and McCaig (2004) for a review). This implies that, whereas Personal and Emotional Well-being both held significant improvements, it is more difficult to impact social well-being significantly.

Meaning

The survey results demonstrated an improvement in the score of meaning but this was non-significant. These results are surprising as within coaching, “meaning and purpose” are core components with few examples of measures of

mental well-being that don't include one or both of them. Referring back to the literature, it can be seen that the typical differentiation between psychological and subjective well-being is that subjective well-being is about pleasure in life whereas psychological well-being is about meaning (Compton et al., 1996). Within the survey these two areas of well-being have been combined in the measures and therefore the relevance of this result is less obvious outside of the specific measure of meaning. As purpose (and meaning) is a key measure within Ryff's (1989) Scales of Psychological Well-being, there are a few studies that provide insights into this outcome measure. Spence and Grant (2005; 2007) and Grant (2012) reported no change to this measure whereas Grant (2014); Green et al. (2006); O'Connor and Cavanagh (2013) all did report a significant improvement to this measure. Interestingly, Grant (2014) and O'Connor and Cavanagh (2013) are mute on the point of the difference between the psychological well-being scores just presenting an overall significance. It is possible therefore that these scores are not as impressive across all 6 scales of psychological well-being which may account for the difference in the results. Notwithstanding, Green et al. (2006) did report tremendous results across all well-being areas. It is possible that were purpose and meaning specifically addressed within the coaching, that a more favourable outcome could be found and perhaps, bearing in mind the significance of this aspect across all mental well-being measures, its importance should be highlighted within coaching?

Self esteem/Optimism

Self esteem and optimism are part of the resilience and self-esteem measures. It is interesting to split these results into their sub-components because it

demonstrated that the participants significantly improved their resilience and resilience/self-esteem overall, but the sub-components of self-esteem and optimism alone did not result in a significant improvement. The actual results demonstrated an improvement across all areas for the participant group, the control also increased their score but only for self-esteem and optimism whereas the resilience and overall score decreased. The control score for resilience is more relevant because it is the largest change in score across all measures of that group, while the participant group only increased a small amount. So, rather than say coaching improves resilience, it would be more pertinent to say that coaching could have had an impact on the resilience of the participants by keeping them at their current resilience and harbouring the effects of challenges etc. This is something that was reflected within the qualitative results and will be discussed below. The optimism score is an interesting topic because this is a long-standing measure of well-being (Scheier and Carver, 1985) and has been highlighted especially within positive psychology as resulting not only in improved well-being (Scheier and Carver, 1992), but also associated with a healthy pattern of cortisol secretion (along with positive affect and psychological well-being) (Huppert, 2008) implying that people with a high score of well-being also have high levels of optimism. Seligman (1990) demonstrated that optimism can be learned and bearing in mind that the control group were also coaches, it is perhaps unsurprising that their optimism score was higher both at the start and end of coaching, although the participant group had greater improvements to their optimism score.

Satisfying life

The results from this study found that there was not a significant improvement to satisfying life and the qualitative data reported similarly. This is different from previous studies that have found that coaching had an impact on measures of satisfying life (according to the satisfaction with life scale - SWLS). For example, Green et al. (2006) found that coaching resulted in a significant improvement in this measure compared to a control group, similarly Duijts, Kant, van den Brandt, and Swaen (2008) and Spence and Grant (2005) also found favourable results for satisfying life. However, similar to this study, Spence and Grant (2007) found that coaching did not have favourable outcomes on ratings of satisfying life and suggested that this was due to the focus of the coaching being on goal attainment and not on measures to improve well-being (including satisfying life measures). While the study presented here was about improving well-being, and well-being improved overall, it appears that this aspect was impacted less than other measures. This could be due to the subjective nature of some well-being measures. Participants discussed the reality of these results for instance life becoming more satisfying because of what actions they were taking; life hadn't changed but their attitude towards it had; or factors outside of their control which made life unsatisfying e.g. illness, job insecurity.

Summary model

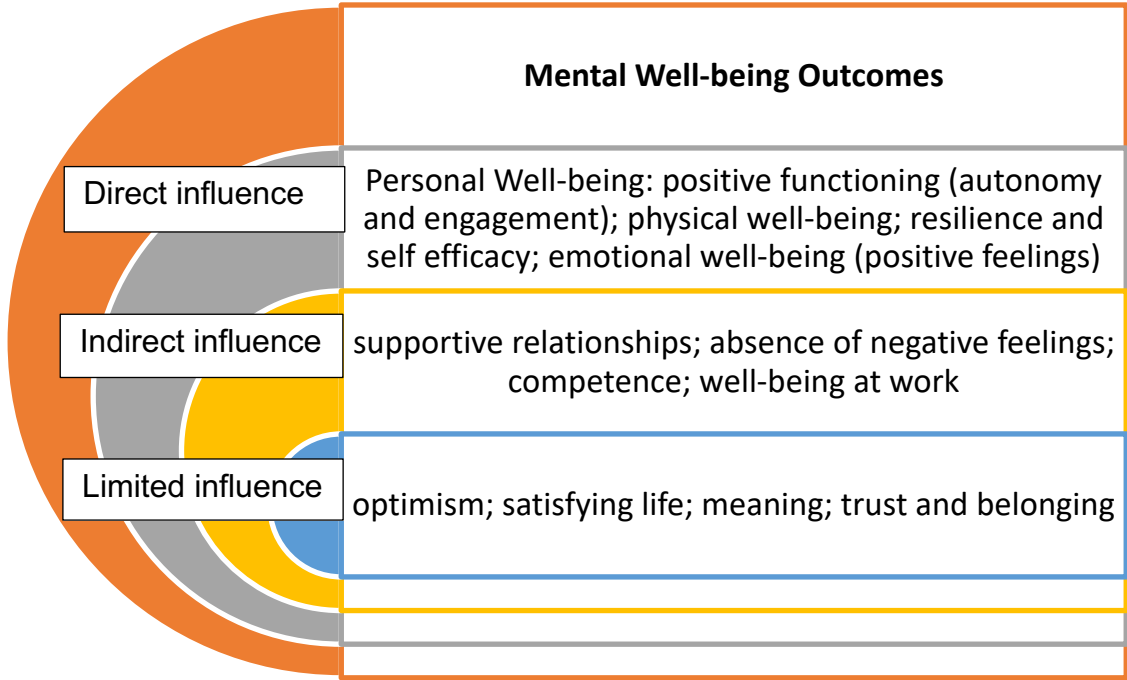


Figure 43: Model of coaching influence on well-being outcomes (© Sydenham, 2020)

Figure 43 summarises the findings in light of the discussions of the corresponding literature and proposes that there are three levels of influence of coaching on well-being outcomes. The direct influence outlines the areas of personal well-being which have the greatest influence from coaching; the indirect influence implies that coaching can have some impact on these which may result in positive well-being outcomes, but it is acknowledged that there may be less control over these outcomes. Finally, the third area outlines the areas where it is considered

that (under the current format) coaching has a limited influence on these well-being outcomes.

5.3.4 Limitations

Whereas with quantitative analysis, clearer conclusions can be made about the changes associated with workplace coaching (e.g. Spence and Grant, 2007) the mixed methods approach taken here has meant that while some findings are significant according to the quantitative analysis, the qualitative analysis can demonstrate otherwise and the researcher is then left to decide which holds more weight and what the balance of each of these means in terms of the research outcomes. This has been the case here, for example, the survey did not list subcomponents of well-being at work and the reliability of one question for each aspect does need to be questioned e.g. “All things considered how satisfied are you with your present job?” as a way to score what has been classified here as “satisfying work”. However, the qualitative data demonstrated in favour of this change across a number of complimentary areas: work-life well-being; reduced stress/anxiety; actions and goal attainment. The limitation is that the conclusions made by the researcher may have been different by a different researcher. Biases have been aimed to be overcome by applying a consistent method of classifying according to themes and the cross referencing of these across the different themes.

Furthermore, participants may have over or under emphasised changes due to an expectation that they would improve, although the dual nature of the mixed methods accounts for this to some extent by providing the opportunity to cross-

reference as mentioned above. It is also possible that due to the open nature of the research questions, specific relevance to the survey components may not have been fully realised which could add or detract from the findings. This is something that is useful for future reference as this research was designed to provide an open platform for changes to well-being whereas future research could follow up on these findings specifically asking around the changes to concur whether they are replicated in future studies.

5.3.5 Implications

Previous research has tended to focus on well-being outcomes in terms of subjective well-being (i.e. positive and negative feelings and satisfaction with life); psychological well-being (i.e. autonomy, environmental masters, personal growth, positive relations with others, purpose in life, self-acceptance) and workplace well-being. The implications of the findings from this section are that it pulls together previous definitions of well-being into a broader scope of mental well-being and contributes to the existing literature by providing greater insights into the scope of changes to mental well-being as a result of coaching across a range of personal, social and work well-being factors. It reinforces existing literature that has found that coaching results in changes and commitment to goal attainment (Spence, Cavanagh and Grant, 2008); reduced stress and anxiety (Grant, 2012, 2014); resilience and self-efficacy (Grant et al., 2009); supportive relationships (Spence and Grant, 2005); autonomy (Green, Oades and Grant, 2006); satisfying work (Grant et al., 2009); and emotional well-being (Green, Oades and Grant, 2006).

And furthermore, that new findings have been discussed relating to changes due to workplace coaching to:

⇒ Physical well-being (vitality) (consistent with theories by Spence and Oades (2011); Deci and Ryan (2008) and to research findings in other areas e.g. positive mental training (Ross, 2014) and mindfulness (Canby et al., 2015).

⇒ Work-life well-being (Grant et al. (2009) focusing on workplace well-being whereas the focus of this point is the well-being of the person at work taking into account their balance between time spent at work and time spent at home).

⇒ Competence (Consistent with theory by Spence and Oades (2011) workplace coaching has been found to have a significant impact on competence which links into key motivation theories).

⇒ Engagement (workplace coaching has been found to have a significant impact on engagement particularly with reference to commitment to goals, this is in accordance with well-being theory which states the importance of engagement for well-being outcomes but this study provides a link similar to Madden et al. (2011) and Kombarakaran et al. (2008) which suggests that coaching increases engagement, however this study adds the element of measuring engagement as part of well-being outcomes as a result of workplace coaching.

The strength of this research is that for the first time, it pulls a wide variety of changes to well-being together within one research project, taking into account the overall impact on mental well-being and the relation to the causal mechanisms of the changes.

Although a non-significant change was recorded for meaning; optimism; trust and belonging and satisfying life, this does not necessarily imply that coaching does not impact these areas of well-being or that they are unimportant. Moreover, that this coaching research didn't impact those areas and perhaps more emphasis should be considered on these areas (as well as the other areas which did report a difference) within coach training and subsequent coaching sessions aimed at improving mental well-being.

5.3.6 Conclusion

On the whole, the quantitative results are reflective of the existing literature and demonstrate favourably in terms of the outcomes from coaching. However, there are some key considerations; coaching appears to have had a better impact upon personal well-being (including emotional well-being) compared to both social well-being and workplace well-being. It also had a greater impact on positive feelings compared to absence of negative feelings, whilst also positively impacting vitality, positive functioning and resilience and self-esteem. These divides unsurprisingly reflect the locus of control, the person-centred approach of coaching and also the subjective nature of well-being. There are also some interesting comparisons between the groups of participants: the coachees group demonstrated the greatest improvement overall but the coaches (and control) had some of the highest well-being scores at the start of the coaching. It should therefore be considered whether the decrease in the control scores represent the subjective nature of well-being, whilst the coaching offers an opportunity to not only buffer the impact of stressors, but also to build well-being over the course of an intervention.

A qualitative analysis also demonstrated that coaching provides the following outcomes: personal and social well-being, in particular, changes to their emotional and physical well-being (vitality); resilience/self-esteem; improved work-life well-being; and supportive relationships. Where there are differences between the qualitative and quantitative results, this implies that the process of coaching encouraged more positive thinking about the coachees personal and work situation, although perhaps the reality was less impressive. There are however, a number of underlying mechanisms which contribute to this effectiveness and result in a variety of well-being outcomes. These underlying mechanisms and processes will now be considered.

5.4 What are the contributing processes and causal mechanisms of workplace coaching that underpin changes to mental well-being?

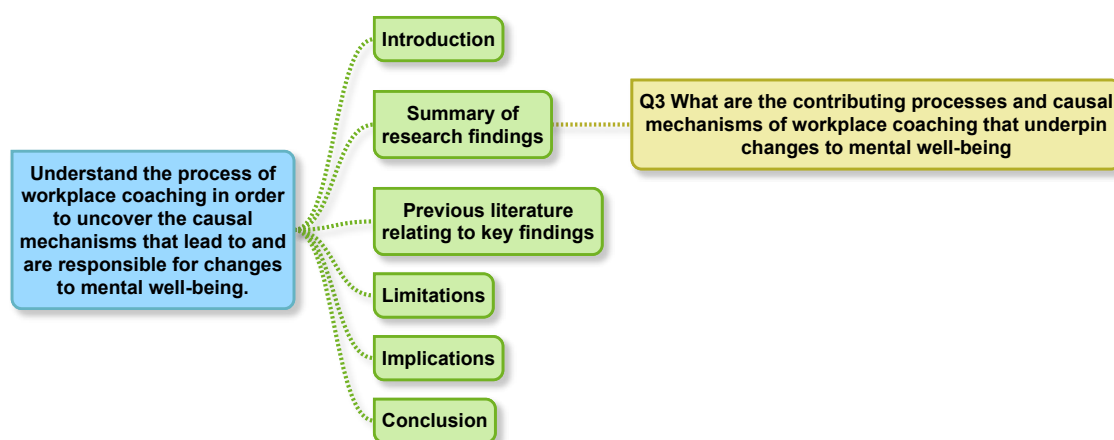


Figure 44: Mind map overview of the content of this section

5.4.1 Introduction

The final research question has explored through the qualitative data the contributing processes and causal mechanisms of workplace coaching underpinning changes to mental well-being. In order to answer this question, specific research questions were posed however, the structure of critical realism that was adopted as the methodology, has also contributed to this discussion; in terms of the inferences that are made from the answers of participants. Firstly, it should be clarified that while participants were asked separate questions relating to each of the research areas, the answers given naturally fell across the focus for more than one research area, this is seen for instance, in that participants considered “improved perspective” to be an outcome from coaching whereas this may also be considered to be a process that formed part of the coaching. Certain components have therefore been inferred to be relevant to this section regardless of whether it has also been considered elsewhere.

5.4.2 Summary of research findings

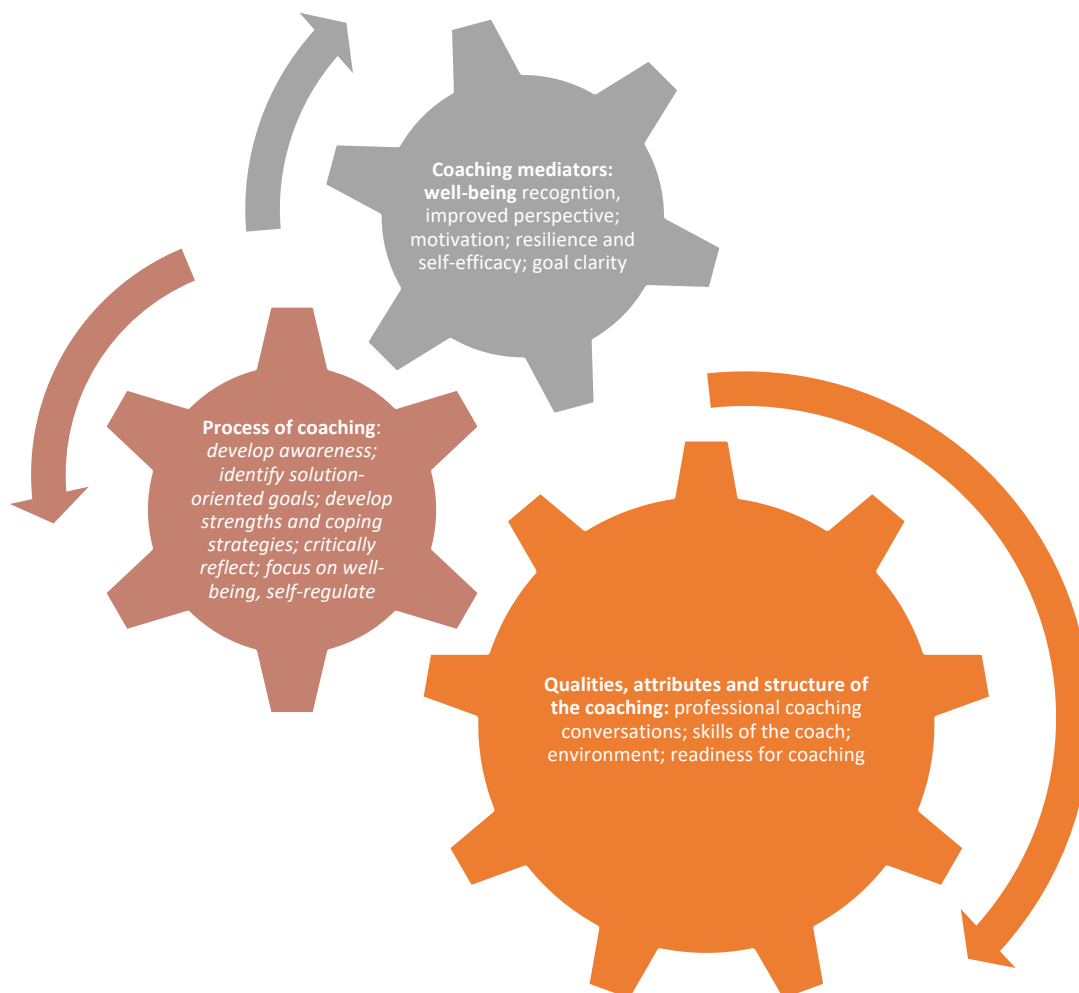


Figure 45: Summary overview of the research findings

Qualitative Findings

The main areas which participants identified as underpinning the efficacy of the coaching were across three main points of focus: the **qualities, attributes and structure of the coach/coaching session** (skills of the coach; professional coaching conversation; environment and the readiness for coaching); the **process of coaching**, (*develop awareness; identify solution-oriented goals;*

develop strengths and coping strategies; critically reflect; focus on well-being, self-regulate); The final area of causal mechanisms related to the **mediators of coaching**: (well-being recognition, perspective; goal clarity; reliance and self-efficacy; motivation). These findings will now be discussed in light of the existing literature.

5.4.3 Existing literature

As has been discussed in the literature review, there is little research investigating the process of coaching to offer insights specifically into how coaching creates change in mental well-being, however, there is some indication outlining the efficacy of certain coaching methods e.g. solution-focus, cognitive behavioural coaching as well as insights into the qualities and attributes of coaching, for instance the relationship between the coach and the coachee. The findings will be discussed in light of the existing literature in relation to the three areas: qualities, attributes and structure of the coaching; coaching process and the coaching outcomes.

5.4.3.1 *Qualities, Attributes and Structure of the Coaching*

The research findings demonstrated that participants felt that the qualities, attributes and structure of the coaching were important factors that impacted upon the outcomes from coaching. In particular, these relate to the three key stakeholders: the coach, the coachee and the workplace, in terms of a “professional coaching conversation”; skills of the coach; environment for the coaching; and the coachees “readiness” for coaching. Evidence exists about the importance of the qualities/behaviours of the coach (e.g. Gabriel, Moran and

Gregory, 2014), their skills to carry out the coaching (Leedham, 2005) as well as the set-up of the coaching, for example, trust (Gyllensten and Palmer, 2006) and relatedness between the coach and coachee (Spence and Oades, 2011). This area was not an original focus of the research, which instead was considering the process rather than the set-up of the coaching. However, in spite of the focus for the research, findings were still made clear about the contribution of these factors towards the outcomes from coaching. They have therefore been covered below in relation to the existing literature.

Leedham (2005) based on the “The Smart Performance Pyramid” model (Cross and Lynch, 1988) created the Coaching Benefits Pyramid Model which is based on the principle that a coaching relationship will be fully effective when built on four key factors:

1. “The skills of the coach (e.g. listening, questioning, giving clear feedback, establishing rapport providing support);
 2. The personal attributes of the coach (knowledge, experience, qualifications, ability to inspire and belief in the coachee's potential);
 3. The coaching process (clear structure and discipline, being mentally challenging and stretching);
 4. The coaching environment (“providing: a safe, supportive place to discuss confidential and sensitive issues, providing time and space to think and reflect”)
- (Leedham, 2005, p. 39).

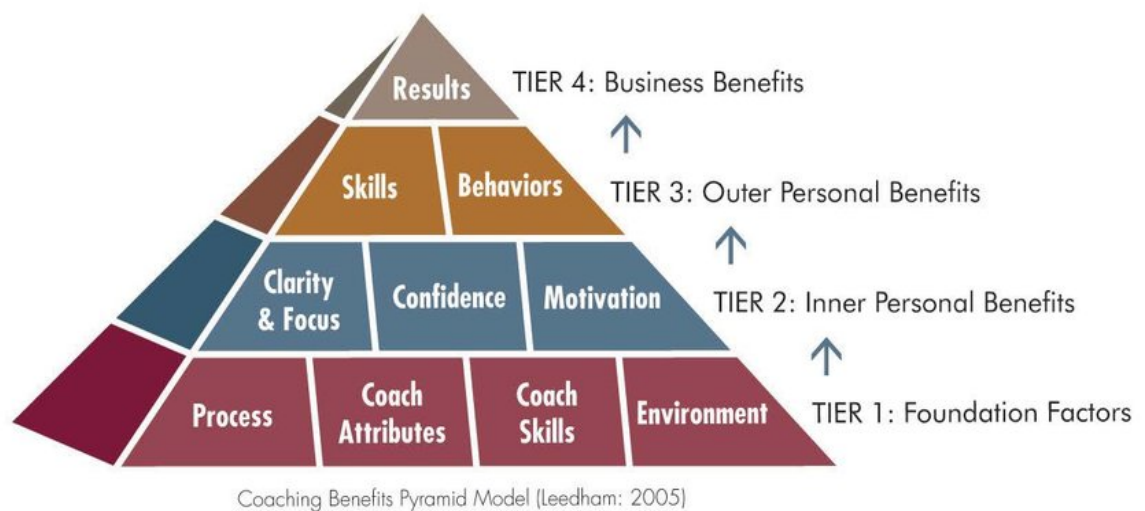


Figure 46: Coaching benefits pyramid model (Leedham, 2005)

The foundation factors (Fig. 46) align with the research findings presented here concerning the coaching process and the coach skills and attributes as already discussed. With regard to the working environment, the impact of supervisory support as outlined by Bozer and Jones (2018) reinforces this point and highlights the impact of supervisory support on factors such as the transfer of learning to the workplace (e.g. Kontoghiorghe, 2004; Burke and Hutchins, 2007). Furthermore, Baron and Morin (2009, 2010) suggested that supervisory support impacted coaching outcomes such as increased self-efficacy as well as reinforcing the perceived value of the coaching process, which therefore encourages the coachees' efforts to develop. These points were raised within the research particularly in light of the support of the organisation to engage in coaching and provide access to it.

Whilst the points raised by Leedham (2005) are important aspects of the coaching foundations, what has been highlighted within the research found here but which appears not to highlight by Leedham (2005) is the importance of the attributes of the coachee as well as the coach or indeed, the importance of joint

responsibility between the two parties in order for a relationship to be fully effective (referred to as the “*readiness for coaching*” and “*professional coaching conversation*”). This was also highlighted by Passmore and Fillery-Travis (2011) in terms of a coachee’s readiness for change as a predictor of coaching effectiveness. Therefore, in terms of the causal mechanisms of change to well-being, it is suggested that the following are the foundations for coaching:

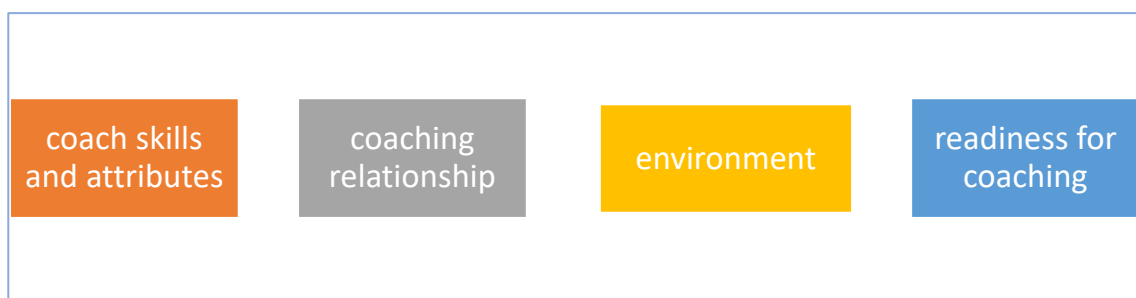


Figure 47: Foundation factors for coaching efficacy

Figure 47 reflects the importance of three key stakeholders (coach, coachee and workplace) whilst also recognising that there is a dynamic between these stakeholders and this is apparent within the coaching relationship and the “professional coaching conversation” that takes place between them. Leedham (2005) also includes the coaching process as the foundation factors, however, this has been separated here in order to determine the specific content. The next part of this chapter will discuss the coaching process in light of the existing literature.

5.4.3.2 *Coaching Process*

Most of the existing literature which explains the process of coaching has centred around the efficacy of a solution-focused-cognitive-behavioural coaching

structure. Grant (2001) compared cognitive, behavioural and combined cognitive behavioural approaches to coaching and then developed a solution-focused, cognitive behavioural (CB-SF) coaching model which was found to be the most effective coaching model and later resulted in favourable well-being outcomes (Greene and Grant, 2003; Spence and Grant, 2005, 2013; Green, Oades and Grant, 2006). Grant (2017) suggests that CB-SF coaching is: *“an approach to coaching that is primarily focused on the development of personal strengths and on defining and attaining practical solutions to problems rather than analyzing the nature or etiology of the presenting problem”* (p. 101). It places an important relationship between people’s thoughts, feelings, and behaviour and posits that goal attainment is best facilitated when a person’s environment is understood and structured to best accommodate the relationship with their thoughts, feelings and behaviour (Grant, Passmore, Cavanagh, and Parker, 2010). Added to this, Lyubomirsky and Layous (2013) suggest that positive activities can increase well-being and that positive emotions, thoughts and behaviours and need satisfaction mediate these outcomes.

Grant et al. (2010) suggested that in order to reach goals, 6 stages should be undertaken:

1. Identify potential outcomes;
2. Articulate specific goals;
3. Identify options and resources and formulate action plans;
4. Enhance motivation by identifying personal strengths to build self-efficacy;
5. Regularly monitor and evaluate progress towards goals;
6. Evaluate progress and modify actions accordingly.

He further suggests that the coach's role is to facilitate the above, specifically helping the coachee:

1. "develop achievable actions plans, and
2. Providing the time and space to monitor and evaluate progress between each coaching session". (Grant, 2014, p. 101)

The research findings suggested that the process of coaching that was facilitative in improving well-being included several areas (Table 12). A comparator between the research findings and the CB-SF coaching model covering the above stages will now be discussed (Table 13):

Process of coaching	Coaching Mediators
Focus on well-being	Well-being recognition
Develop awareness	Improved perspective
Critically reflect	Motivation
Identify solution-oriented goals	Resilience and self-efficacy
Develop strengths and coping strategies	Goal clarity
Self-regulate	

Table 12: findings representing the process and mediators of coaching

Overview	Research findings Main focus: wellbeing <i>A professional conversation in a supportive, collaborative environment where coachees feel listened to and are given the time and space to focus on solutions to improve their wellbeing.</i>	CBSF components Main focus: thoughts, feelings, behaviour and relationship with their environment <i>“an approach to coaching that is primarily focused on the development of personal strengths and on defining and attaining practical solutions to problems” (Grant, 2017, p.101)</i>
Stage 1	Raising the coachees awareness of wellbeing so that they can recognise when it is depleted and understand how to improve their own wellbeing and are accountable for this; Giving the coachees clarity about their wellbeing; The coach helps the coachee consider their situation from different perspectives by reflecting back to the coachee, using open questions;	Identify potential outcomes;
Stage 2	The coach supports the coachee to identify solutions to their issues and clearly articulate goals that will support them to move forwards.	Articulate specific goals; (coach to support coachee to develop achievable actions plans)
Stage 3	The coaching supports the coachee to develop strengths and coping strategies;	Identify options and resources and formulate action plans;
Stage 4	The coach facilitates self-efficacy in the coachee, helping to build resilience and motivation	Enhance motivation by identifying personal strengths to build self-efficacy;
Stage 5	The coach gives the coachee space and time to reflect and talk through issues and progress towards goals;	Regularly monitor and evaluate progress towards goals;
Stage 6	Coach to: Providing the time and space to monitor and evaluate progress between each coaching session	Evaluate progress and modify actions accordingly.

Table 13: Findings compared to CB-SF coaching components

Comparing the findings with the CB-SF model above provides an interesting overview of the similarities between a structured coaching model and the fundamental components of coaching which doesn't necessarily follow a particular model. This implies that the above areas are important structures and processes within coaching for well-being whilst also reinforcing the efficacy of a CB-SF approach.

Similar findings have been found among other studies, for instance, Green et al. (2007) also aimed to raise awareness, identify issues and resources to move them towards their goal. Other studies have reinforced the importance of systematically working through the self-regulation cycle (e.g. Green et al., 2006; Gyllenstein and Palmer, 2006). Each of these studies has at its focus monitoring progress towards and attaining goals, which also underpins the findings of the research presented here. It should be noted however that some studies instead focus more on our thoughts (e.g. Carlson and Brown, 2005; Kelley, 2011; Spence et al., 2008) although these have been reported to have less favourable outcomes when compared to goal-focused coaching (e.g. Grant, 2001b).

5.4.3.3 Does being a coach predispose a high score of well-being?

The monitor-evaluate-modify cycle of the coaching presented both in terms of this research and a CB-SF approach forms a cycle of self-regulated change which is considered key in creating intentional behaviour change (Carver and Scheier, 1998). This raises an interesting question whether changes from coaching may be sustained as coachees learn to self-coach and naturally take themselves

through this process thus resulting in ongoing benefits from coaching? As discussed, the quantitative data demonstrated that both the coaches and control (also coaches) had a higher score of well-being than the participants at the start of coaching and the coaches had the highest score at the end of the coaching (the control group decreased so were marginally below the participants final score). Within the interviews the coaches reported that being a coach impacted positively on their well-being especially as they reported being able to “*use the coaching techniques on themselves*” and reflect back on learning from the coaching sessions. This implies that the training that coaches are given and the process of coaching such as setting goals, reflecting on issues with a focus to find solutions and having a greater awareness of their well-being and actions that contribute towards it, predisposes them to a higher score of well-being. But, the coachees group improved their well-being more overall, therefore, is there a ceiling effect that could be apparent or do coaches naturally self-regulate their behaviour? There were some indications within the interviews that the content of the well-being coaching was not new to the coaches and something they were using already but that the coaching helped to reinforce the positive behaviours and “add to their toolkit”. This research is the first of its kind to consider the impact of well-being of coaches and coachees so it is interesting to note these differences but also unsurprising in some ways, especially if the causal relationship between coaching and well-being is reinforced. This research has indicated that the benefits of being a coach extend to the wider benefits of well-being although further research would be required to make clearer conclusions on this relationship.

5.4.3.4 *Coaching mediators*

While section 5.3 outlined the changes to mental well-being that occur as a result of the coaching, more direct changes can also be observed but which are part of the process of coaching, these have been labelled as “coaching mediators” in order to explain how and why coaching may result in favourable outcomes. It should be noted that the process of coaching and even the qualities, attributes and structure of the coaching could also be considered “mediators”, however, they have been separated for clarity to fully determine the causal mechanisms of coaching. This section specifically refers to the components of coaching that were thought to mediate the well-being outcomes and further clarify how coaching impacts upon well-being. There were five main areas which participants recorded as coaching outcomes that ultimately impacted on their mental well-being:

Well-being recognition

Improved perspective

Motivation

Resilience and self-efficacy

Goal clarity

Well-being recognition

As discussed, recognition especially in terms of a coachees well-being was a key outcome from the research findings. This was not only recognition about positive or negative well-being traits, but also the understanding about what to do about it. The concept of “recognition” has particularly been highlighted within the research into thought recognition and psychological well-being (e.g. Sedgeman,

2005; Sedgeman and Sarwari, 2006; Halcón, Robertson and Monsen, 2010; Kelley, 2011; Pransky and Kelley, 2014; Kelley, Lambert and Pransky, 2015). Although in this regard well-being is the outcome and thoughts are the focus, it still highlights the importance of recognition. In a follow up study, Kelley (2011) also found positive correlations between mindfulness and thought recognition. Mindfulness has been related to enhanced psychological health (e.g. Brown and Ryan, 2003; Carlson and Brown, 2005; Canby et al., 2015). The combination of these two components suggests that more mindful individuals are less judgmental and experience their thoughts without getting attached to them or taking them personally (Heppner et al., 2008). Therefore, well-being recognition in the one sense is about recognising that our thoughts are not our reality and in the other sense, about understanding the steps we can make to improve our well-being. Interestingly, training could also be utilised to raise awareness through formal and informal education (as was the case in this research) and this highlights the link between attaining this mediator through combined coaching and training programmes.

Improved perspective

The cognitive behavioural coaching framework suggests that coaching aims to gain a perspective about the route of that persons difficulty and that together with their coach, they work to discover how the coachee can reach their full potential (McMahon, 2017). Furthermore, Naficy and Isabella (2008) suggest that more information and a greater perspective is gained when a coachee engages in mutual sharing with their coach and these perspective are replicated in the findings presented in this research. Underpinning the importance of perspective

is the concept that if a coachee can view their situation from different perspectives, this may result in improved emotions, better goal attainment and overall well-being. The Broaden and Build theory of positive emotions (Fredrickson, 1998, 2001, 2004) supports this point which suggests that we can build our social, physical and psychological resources by broadening and expanding our thought-action tendencies with positive emotions and this gives us broadened and expansive attention. While the link to the coaching literature in relation to this theory has not been made, the findings in relation to the literature suggest that the improved perspective gained from a coach-coachee relationship may result in the type of broadened attention referred to in this theory. Add to that the empirical evidence of the link between goals and well-being and it may give light to some of the causal mechanisms responsible for the outcomes of coaching.

Motivation

While the coaching literature refers to coaching motivation in terms of the coachees motivation to attend and engage with motivation (e.g. Bozer and Jones, 2018), the findings in this research related to the coachees motivation to take action following a coaching session. The key motivational theories discussed in the literature review related to this point was Self-Determination Theory (Deci and Ryan, 1985) which differentiates between types of motivation and suggests that autonomous motivation (internal motivation that stems from engagement with autonomy, competence and relatedness) is reliably related to psychological health. Through coaching, these components can be used to support the processes of internalisation and integration. This will ultimately enable the

coachee to self-regulate and sustain improved mental well-being (Ryan et al., 2008). Gabriel, Moran and Gregory (2014) support this premise and propose the application of self-determination theory to humanistic coaching to impact upon well-being and performance. They suggest that different coach behaviours can impact upon the psychological needs of coachees and ultimately on coachee outcomes (Figure 48).

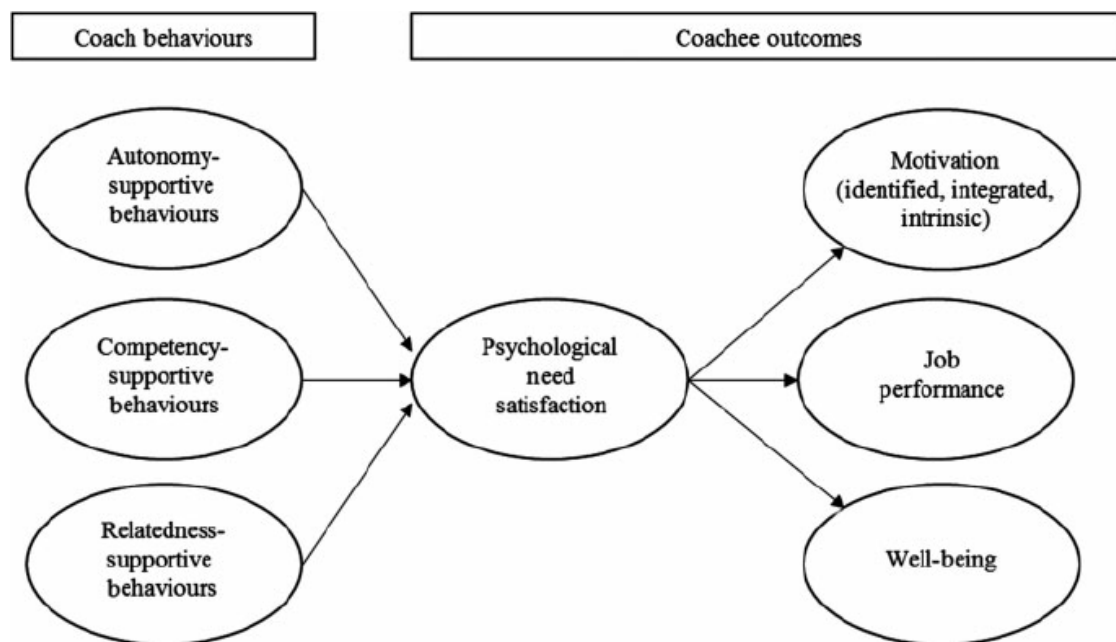


Figure 48: Proposed relationships between supportive coaching behaviours, psychological need satisfaction and coachee outcomes (Gabriel, Moran and Gregory, 2014)

For instance, they suggest that contributing to “autonomy-support behaviours” is the emphasis on enabling coachees to work through challenges and come up with their own answers. Added to this, Taylor and Bruner (2012) suggest this is attained when coaches support coachees to follow their beliefs in how goals could be attained instead of prescribing goals to them. They go on to suggest that for relatedness-support behaviours, the rapport-building behaviour of the coach-coachee relationship helps to meet this need. Finally, Gabriel, Moran and Gregory (2014) suggest that competency-support behaviours are realised through learning, development and growth, so for instance helping coachees

develop work-related objectives, coaches provide the tools for coachees to work autonomously. Linked to this theory, Grant et al. (2010) suggests that motivation is enhanced through coaching by identifying personal strengths to build self-efficacy. This aligns with prior research by Burke and Linley (2007) who researched the impact of enhancing goal self-concordance through coaching and hypothesised that when undergoing coaching, awareness is heightened and this leads to changes in a type of motivation called self-concordance, and commitment (a measure of the amount of motivation). They found significant increases in self concordance and commitment for the coached goals. They suggest that coaching can lead to changes in goal self-concordance, commitment and alignment to personal values and furthermore that one of the causal mechanisms of coaching efficacy is through enhancing self-concordance of coached goals. This provides an interesting link between the causal mechanisms and outcomes of coaching but also highlights the importance of self efficacy.

Resilience and self-efficacy

During the interviews, participants used varying terms with similar meaning: confidence, inner-strength, assertiveness, self-esteem or self-confidence, all referring to the same thing: someone feeling that they can achieve what they want to achieve and the recognition of what they needed to do to cope when times were challenging or going through change. The literature refers to this type of definition under the heading of “self-efficacy” which incorporate more than just confidence, but also the belief that they can achieve what they are setting out to do. Self-efficacy has been defined by Wood and Bandura (1989, p. 408) as

“beliefs in one’s capabilities to mobilize the motivation, cognitive resources, and courses of action needed to meet given situational demands”.

While participants didn’t refer to the term “self-efficacy”, the findings represent this definition, for instance: when reflecting on the survey results, participants could identify with the positive change in resilience and self-efficacy, they felt they had more tools to think about in terms of well-being and they were using strategies to build their resilience: *“you can help yourself, you’ve got some control because you’ve recognised you’ve got that ability to have some of that control yourself”* (COA14). Another participant commented about her increase in resilience:

“I feel pretty able to get where I want, where I want to be, and I am pretty resilient, I know that now, I’ve tested it a bit more...because I thought I was resilient but now I think yeah, I probably am. How do you know that? Because by taking on so many different things, working in some really distressing situations and challenging situations and that hasn’t impacted upon me and my emotional well-being, I’m able to manage that” (COA6).

Bandura (1977) suggests that self-efficacy is the main determinant of behaviour change. Relating this to coaching, Bozer and Jones (2018, p. 17) suggest that *“higher self-efficacy indicates that the coachee is more likely to set more challenging goals, has a greater belief in his or her ability to achieve the goals, and will experience sustained internal motivation, focus, and persistence in the face of obstacles in the pursuit of these goals”*. They go on to suggest that self-efficacy is increased within coaching according to the four processes (as stated by Bandura (1982) to increase self-efficacy): enactive mastery; successful model replication after overcoming difficulty, verbal persuasion, and emotional arousal (Bozer and Jones, 2018). This is reinforced by previous literature demonstrating

that not only is self-efficacy demonstrated as an outcome of coaching: (e.g. Baron and Morin, 2009; Moen and Allgood, 2009; Ladegard and Gjerde, 2014) but furthermore that coachee self-efficacy has been found to be an important antecedent of affective coaching outcomes as reflected in perceived coaching effectiveness (De Haan et al., 2013; de Haan et al., 2016).

Goal clarity

Whilst there is an underlying assumption that working through an issue in coaching may result in greater clarity about the outcome or goal, there is little empirical evidence that directly observes this effect from coaching as well as other coaching outcomes. A thesis by Jones (2015) researched the effectiveness of workplace coaching by considering coaching outcomes, tools to measure coaching outcomes, as well as the underlying processes that explain why and how coaching works and the factors that may impact on coaching effectiveness. Jones (2015) suggested that the coachee experiences clarity about the learning that takes place in the coaching session and the transfer and application of this knowledge to the workplace (a process she refers to as psychological fidelity). Furthermore, relating specifically to the workplace, she names “career clarity” as one of six factors on a 21-item scale of coaching effectiveness. This suggests that career clarity is one of six outcomes that coachees perceive to occur as a result of coaching. As a pilot study, the scale will need to be administered to larger, multiple samples to determine validation however it begins to add to the evidence about coaching processes and outcomes and is further enhanced by the findings within the research presented in this thesis.

5.4.4 Coaching for Well-being

What this research has found is that coaching that raises a coachees awareness of their own well-being, builds self-efficacy and motivation to identify solutions to overcome barriers in order to attain well-being goals, has positive benefits in terms of well-being outcomes. The coaches role within this includes offering a supportive environment where the coach can reflect back, ask open questions that give the coachee space and time to gain clarity about their issues and then support them in identifying solutions and appropriate goals in which they feel confident and motivated leading to self-regulation. There are many varying models of coaching and these cover different outcomes (e.g. goals; emotions) however there is yet to be an evidenced model of coaching for well-being.

The model below (Fig. 49) indicates a potential model to guide coaches in their coaching sessions whilst also providing insight into the coaching outcomes which are supportive of the overall aim of improving mental well-being. It identifies the key findings from the research and literature and presents it in terms of a structured coaching model which can guide the coach in covering each of the key areas and the outcomes expected from the coaching. The findings of this research suggest that if the key components of this model are followed, it should result in improved well-being outcomes. As this model is a result of the research findings and not part of its methodology, it will need to be subject to further research in order to evaluate its full impact, therefore it is being presented as guidance which offers the coach flexibility in terms of how it is delivered i.e. the stages could form a whole or part of a coaching session, in addition, complimentary coaching models could be used alongside e.g. exercises which

measure well-being as a starting point for raising awareness. Perhaps, the greatest opportunity of this model is that its contents do not exclusively have to be tied to coaching and as found in the qualitative findings, the training elements of the coaching programme also proved beneficial in raising awareness of well-being. Therefore, the model presented in Figure 49 could be used as an outline for coaching, training, supervision, mentoring, personal development and perhaps even forms of therapeutic intervention.

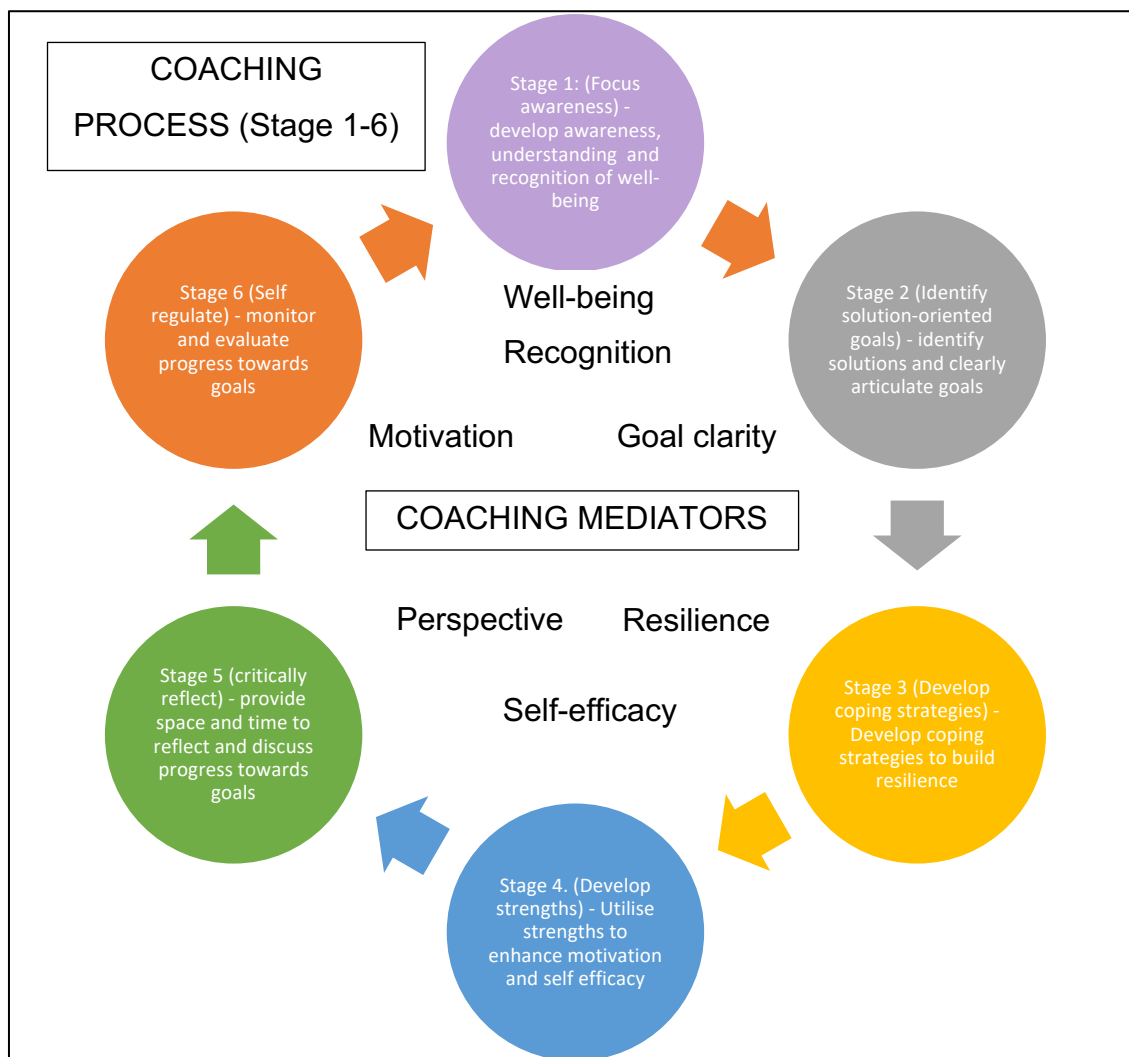


Figure 49: Model of Coaching for Mental Well-being (© Sydenham, 2020)

There are several key pieces of theory underpinning both this approach to coaching and the corresponding literature:

1. To reinforce a cycle of self-regulated change (Carver and Scheier, 1998)
2. Focus on the development of personal strengths (Govindji and Linley, 2007)
3. The development of self-concordant goals (Sheldon and Elliot, 1999) is specifically associated with greater well-being (Linley et al., 2010). That is goals which are personally valued and associated with autonomy, connectedness and growth, this is also very similar to Spence and Oades (2011) suggestion that coaching using self-determination theory satisfies three basic psychological needs: autonomy, competence and relatedness.

5.4.5 Discussion Summary (Q3)

This section has highlighted the contributing coaching processes and causal mechanisms underpinning changes to mental well-being. The findings have been outlined in terms of the coaching process, the coaching mediators and the qualities, attributes and structure of the coaching. This section has discussed the relevance of these findings in relation to previous literature and also the contribution that has been made by bringing the coaching process and coaching mediators together presented in terms of the Model of Coaching for Mental Well-being.

5.4.6 Limitations

When undertaking a critical realist approach to research, the question of how the underlying causal mechanisms will be elicited is open to interpretation and a

retroductive approach to understanding this is adopted. In the case of this research, this has been achieved by comparing and contrasting the findings in relation to the research questions and asking whether what has been said was part of the process or a mediator of coaching, why events happened in the way they did, and the importance of these mechanisms in relation to the overall objective of well-being. While this philosophical approach to research has been adopted for the advantage in considering these deep mechanisms, there are limitations to the way that it is achieved in that different researchers may carry out this process in a multitude of ways, which naturally may result in different findings. Furthermore, this section has been undertaken wholly utilising qualitative data analysis and therefore is further open to interpretation on behalf of the researcher: While the interview findings have aimed to interpret the data in an unbiased manner, awareness of the emphasis placed on the use of language needs to be considered cautiously e.g. terms such as “it helped significantly”, “I just think it’s amazing” need to be considered in light of researcher-bias. Furthermore, the repetition of certain words indicating importance, also needs to similarly be considered.

Perhaps one of the hardest limitations to overcome is the issue of causality, without undertaking controlled, scientific methods of research. Furthermore, in this research, the causal mechanisms were elicited from qualitative data which present further challenges to establish the route cause. Naturally, through the whole research process, it is possible that external factors will have impacted the research results which was why a control group was selected. With regard to this, participants were questioned about factors which may have impacted on the

results, they were also asked the research questions before they knew whether there had been a change to their well-being (which was provided at the end of the research interview). This approach facilitated an open conversation about whether there had been any changes to their well-being but also what the causal mechanisms may have been. The number of interviews gained also gave the opportunity for repetition of themes and these have fed into the final results which have been relayed in terms of the research findings.

This research is the first to consider a critical realist approach to measurement of the impact of coaching on mental well-being and therefore will benefit from further testing of the now developed model which will add to the rigour of the findings moving forwards.

5.4.7 Implications

The findings discussed here have implications for contributing to the existing literature but also for contributing towards future research and professional practice. Each of these will be discussed in turn:

5.4.7.1 Contribution to literature

Contributing to the findings by Leedham (2005), this research has found that additional emphasis needs to be considered among the foundation factors for coaching success to include not only the coach skills and attributes; the coaching relationship; and the environment, but also the coachee's readiness for coaching. It is suggested that it is the responsibility by all three parties and the dynamic

between them that forms the foundation for a successful professional coaching conversation.

As discussed, much of the previous literature focused on the details of the coaching process, relate to a SF-CB approach. The research here has compared non-specific coaching with the SF-CB approach and found complimentary findings that reinforces previous studies. Furthermore, a model of coaching has been presented which offers opportunities for further research in fully identifying the outcomes not only for well-being but also for wider coaching efficacy.

The findings have also suggested that while coaching presents benefits to mental well-being, it is proposed that being a coach creates the skills and conditions for self-coaching and therefore predisposes high well-being. This is an under-researched area of the literature and would benefit from further studies. At this stage, it has been seen that coaches had a higher starting and finishing score for well-being (although the coachees reported a greater change to their well-being). This has implications for practice in terms of whether organisations invest in coaching to improve mental well-being or in coach-training?

While section three outlines the well-being changes from the coaching, this section has considered the coaching outcomes. Leedham (2005) refers to these as “inner personal benefits”. Similar to previous findings which suggest that clarity and focus, confidence and motivation are the key inner personal benefits from coaching, this research relates to these areas with a slightly different focus favouring resilience and self-efficacy as a more encompassing term than

confidence and refines “clarity and focus” into “goal clarity”. This highlights the importance of identifying goals and furthermore aligns with the findings by Jones (2015) which also found career clarity as one of 6 factors of coaching effectiveness. Added to these findings are two further areas of improved perspective and well-being recognition which have been discussed as coaching outcomes. The former of these aligns with the Broaden and Build Theory of Positive Emotions and relates that theory to the field of coaching through empirical findings rather than existing theoretical contributions.

Finally, this section has included the creation of a coaching for well-being model which pulls together the findings outlining not only the coaching process but also the coaching outcomes and the overall aim to improve mental well-being. While this model was not used as part of the research, for the first time in the coaching literature, a model is presented that incorporates both these elements within the focus of well-being. It contributes to the existing literature by providing findings backed up by previous studies identifying the causal mechanisms of coaching for well-being outcomes.

5.4.7.2 *Contribution to professional practice*

The field of coaching is growing and along with it the evidence base. While there are many coaching models in existence, not all of them are underpinned by evidence. The contribution here is a suggested coaching model which could be used to guide practitioners looking to support their coachees with well-being outcomes. It offers flexibility in terms of the coaching tools, techniques and

structure whilst also providing the key components that need to be included for the efficacy of coaching for well-being.

Furthermore, it is suggested that with further research, this model may form the foundations for other forms of well-being interaction, for instance, while this model has been created within the context of well-being efficacy, it may be more widely applicable as a model of change within the fields of training, mentoring, supervision and personal development.

5.4.8 Conclusion

This section has provided several contributions both to the existing literature base as well as to professional practice. Adopting a critical realist approach has enabled findings to be made about the causal mechanisms responsible for well-being change. This section suggests that changes to well-being do not happen accidentally and that it is through several underpinning causal mechanisms that well-being can be improved. It is further suggested that through the natural process of coaching, these key features are incorporated and thus change is instigated, established and maintained. If businesses want to increase their success through engagement with employee well-being, they would do well to consider coaching among the interventions that are adopted for business success. Furthermore, by taking this a step further to engage with a coaching culture that harnesses the processes and outcomes suggested here, businesses may create the conditions to build and sustain employee well-being, resulting in greater positive outcomes for the business and more widely within society.

5.5 How the findings address the gap in the literature:

Is workplace coaching an effective methodology for improving the mental well-being of employees

5.5.1 Introduction

Throughout the literature review, reference has been made to the evidence suggesting that coaching is effective upon a number of well-being outcomes. The final section of this chapter is considering, in light of the research findings presented here, whether coaching is an effective methodology for improving the mental well-being of employees. This takes into account not only whether coaching impacts positively upon mental well-being, but whether the processes and causal mechanisms of coaching that result in well-being outcomes suggest the efficacy of coaching as a methodology for improving mental well-being.

As referred to in the literature review, efficacy relates to the ability of the method of coaching to result in desired changes to mental well-being. Therefore, while few methods can be guaranteed to provide a favourable result every time, efficacy in this sense, refers to the ability of coaching. Throughout this thesis, the aim has been to determine the efficacy of workplace coaching as a methodology for improving mental well-being and this has been undertaken by concentrating on the processes and causal mechanisms of coaching: how does coaching work? This thesis has considered each component of the above aim by asking: does participants well-being change as a result of a workplace coaching intervention; what changes to mental well-being occur as a result of workplace coaching; and

what are the contributing processes and causal mechanisms of workplace coaching that underpin changes to mental well-being? By understanding these questions, greater insight can be gained as to whether coaching is an effective method for workplaces to adopt within their well-being strategies. Each of these questions has been discussed in the previous sections of this discussion, the task now is to consider whether together the results combine to determine the efficacy of coaching.

5.5.2 What is coaching for mental well-being?

Throughout this thesis reference has been made to coaching, coaching for mental well-being and workplace coaching among other coaching terms. The question for this section is to determine the efficacy of workplace coaching on mental well-being, but further than coaching that takes place in the workplace, what type of coaching is this?

This research was slightly unusual as it included training as well as coaching within one aspect of the research, it therefore may be considered to fall closer to the definition of “health coaching” which is described as *‘the practice of health education and health promotion within a coaching context to enhance the well-being of individuals and to facilitate the achievement of their health-related goals’* (Palmer, Tubbs and Whybrow, 2003, p. 92). That said, the context of health coaching is usually within healthcare and not the workplace which is where the coaching utilised in this research differs. While the training was utilised in order to prepare the coaches for their coaching and not to compare the impact of the coaching over the training or vice versa, there were some interesting findings

about the underlying mechanisms that came from the training and were subsequently used in the coaching. In particular, participants drew reference to improved awareness, understanding and recognition of well-being aspects. Awareness is a natural outcome from coaching that is the result from the process of questioning and reflecting (see Fig. 50).

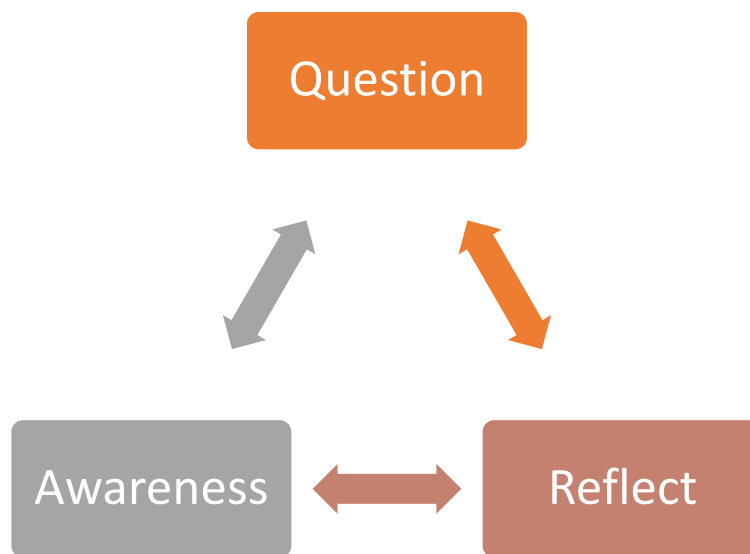


Figure 50: Awareness cycle of coaching (© Sydenham, 2020)

However, while (self) awareness as above could be an outcome from coaching, understanding of the topic of well-being and therefore the relating of that knowledge to recognition of factors that contribute or detract from well-being, is not necessarily within the definition of coaching, but could be gained from other forms of intervention e.g. training (see Fig. 51).

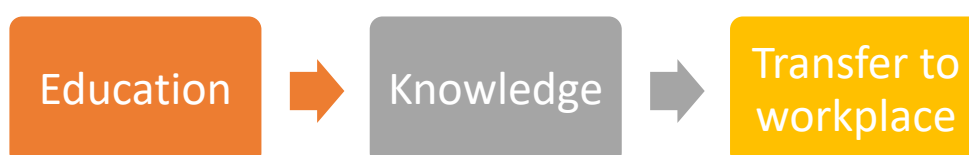


Figure 51: Knowledge transfer from training (© Sydenham, 2020)

Training may help a person to understand factors impacting on their well-being but it isn't until they relate that learning to themselves that they may then become aware of how to take responsibility and make appropriate changes. This is reflected in the literature especially around the benefit of coaching in the translation of learning to work based behaviour (e.g. Baldwin and Ford, 1988). It is suggested here that by combining the factors of knowledge, understanding and awareness; greater well-being outcomes can be achieved. This has yet to be determined by randomised controlled trials, however similar research indicates in this direction. For instance, Spence, Cavanagh and Grant (2008) undertook a combination of coaching and mindfulness training interventions and found that the combined approach yielded better goal attainment behaviour than general health education alone. Similarly, Olivero, Bane and Kopelman (1997) found that training followed by coaching enhanced productivity. Added to this, Losch et al. (2016) undertook a randomised controlled trial to evaluate the impact of coaching and training on procrastination and goal attainment. They found that both coaching and training helped facilitate goal attainment and reduce procrastination, but that coaching was superior in helping participants attain their goals, in particular, knowledge was enhanced by the use of training whereas personal goals were particularly facilitated by the coaching.

Therefore, the literature is suggesting that while coaching is seen to result in better outcomes than training alone, there are added benefits to considering the combination of training and coaching. Coaching throughout this thesis has utilised the definition of a collaborative process by which the coach facilitates self-awareness, responsibility and well-being, which contribute towards goal

order to facilitate the transfer of knowledge both into practical application in the workplace but also towards greater self-awareness.

5.5.3 What is mental well-being and can we change it?

Throughout the literature review and into the discussion, an assumption has been made that mental well-being is constituted of psychological and subjective well-being. The National Accounts of Well-being utilised in this research presented their questionnaire as “personal well-being” and “social well-being” along with “well-being at work”. Their structure assumed the inclusion of the two dimensions of well-being (psychological and subjective) whilst amalgamating them under different headings. Throughout the findings, it has to be agreed that well-being is multi-dimensional, however, there is still confusion about the exact definition and construction of mental well-being and therefore, a contribution to the theory of well-being can be made by clarifying the structure and content of mental well-being (and therefore clarifying what areas need to be impacted in order to fulfil the criteria of an effective methodology).

Figure 53 presents an alternative view of the components of mental well-being taking into account existing theories of Ryff (1989); Ryan and Deci (2001); Michaelson et al. (2009); Huppert and So (2011); and Seligman (2011) and combined with the main findings from the research to clarify the makeup and contents of mental well-being. The researchers above were specifically chosen because their models of well-being are well established, converge with each other, and demonstrate both dimensions of mental well-being. The model demonstrates that both the psychological and subjective well-being are contained

under the headings “feeling good” and “positive functioning” and details the associated components of these. The main differentiator of this model as opposed to those of others is the amalgamation of work and life well-being. The reason for this is that it reflects the research findings and furthermore, there has been a move in the literature from work/life balance towards “work/life blend” (Siciliano, 2019) and indeed aspects such as physical health, competence, environmental mastery etc are not mutually exclusive of work/life. It is therefore felt that combining these facets represent the synthesis between work and life.

The second difference with this model is the addition of the “resources” section. The reason for this is that mental well-being is not only about feeling good and functioning well, it is also about having the resources available to make the most of life’s opportunities. The research here has demonstrated that coaching results in outcomes which subsequently have a positive impact on mental well-being, therefore by representing these facets in the model, it communicates not only what well-being is but also what is needed to improve it. The resources have been identified as part of this research and highlight the causal mechanisms of change.

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

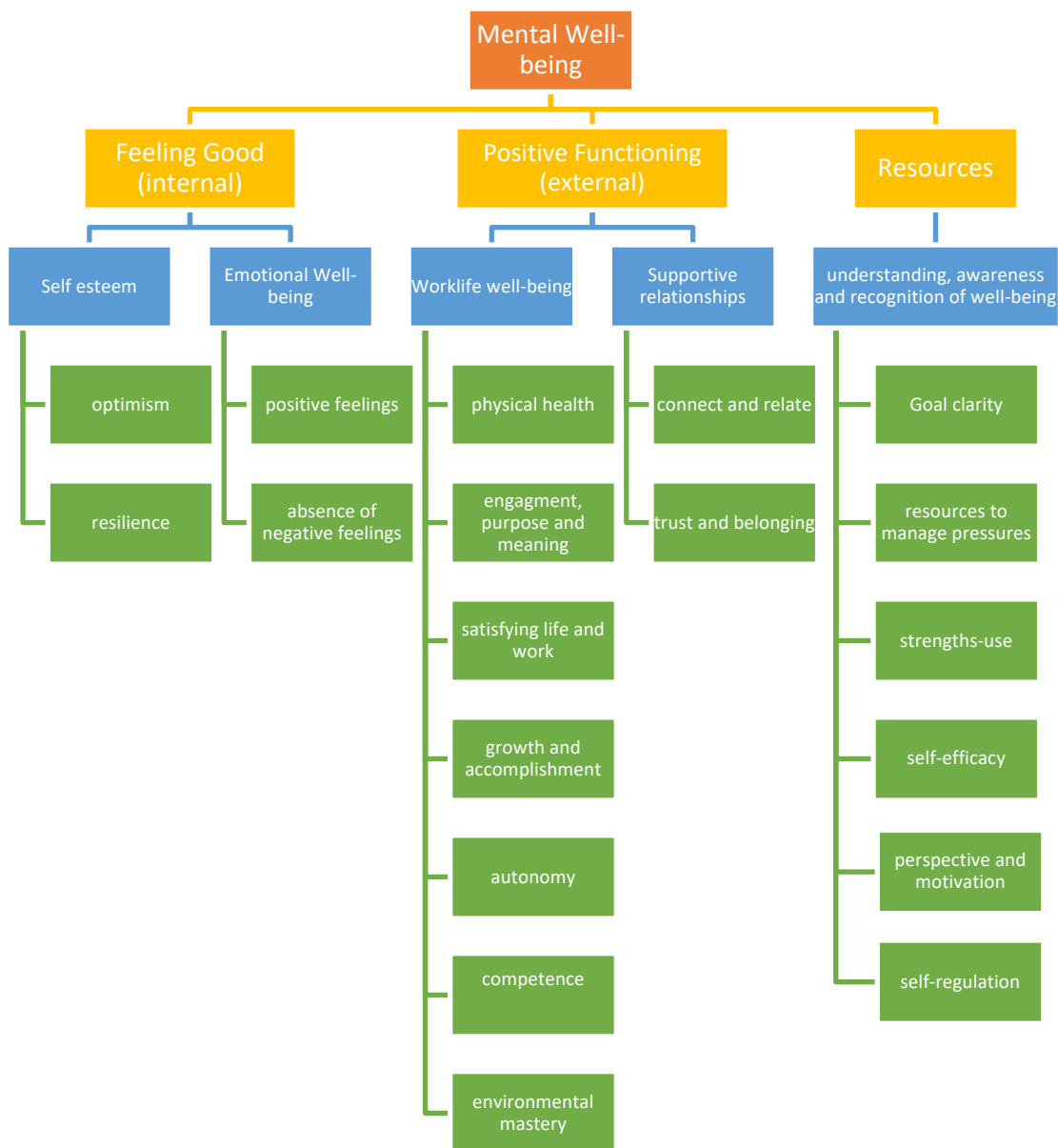


Figure 53: Mental Well-being components (© Sydenham, 2020)

Taking into account the model presented above along with the research findings, the role of coaching can be demonstrated as the intervention to achieve the resources needed in order to influence well-being outcomes. Added to this, coaching has been seen in this research (and others') to result in a significantly

positive impact on the mental well-being of participants overall and across several of the individual components. Not all of the areas had a positive outcome, this represents the multi-dimensional nature of mental well-being and a lack of control of some of these aspects (for instance while a coachee could be coached on their feelings towards physical health, the outcome of the coaching may not return a physical improvement). In terms of efficacy, it has been demonstrated that coaching had a positive impact on mental well-being which leads us to the final questions; what are the contributing processes and causal mechanisms of workplace coaching and combined with the favourable well-being outcome, do they determine the efficacy of workplace coaching?

5.5.4 The contributors and determinants of workplace coaching efficacy

Whilst there are no systematic reviews considering the efficacy of workplace coaching on well-being outcomes, reviews can be found in more general coaching outcomes. For instance, Grover and Furnham (2016) conducted a systematic review of the effectiveness of coaching as a development intervention in organisations along with the mechanisms underlying it. While they found evidence for well-being as an outcome from coaching (among a number of other outcomes), they admitted that *“the evidence pertaining to variables that potentially moderate or mediate the effectiveness of coaching interventions within this population is severely limited but does implicate the existence of moderators and mediators that need to be explored with further research”* (Grover and Furnham, 2016, p. 37).

Added to this, Bozer and Jones (2018) subsequently explored the factors that determine workplace coaching effectiveness and provides some useful foundations on which to discuss the efficacy of coaching. Utilising both qualitative and quantitative research on workplace coaching, they synthesised 117 empirical studies and found seven areas that determine workplace coaching effectiveness: self-efficacy; coaching motivation; goal orientation; trust; interpersonal attraction; feedback intervention, and supervisory support. During the primary research presented here, participants commented that factors impacting on perceived coaching for well-being efficacy were: the foundation factors (coach skills, coaching relationship, environment; readiness for coaching) and the coaching outcomes: (well-being recognition, motivation, goal clarity, improved perspective, resilience and self-efficacy). What is interesting is the similarity in the findings of key determinant of coaching effectiveness between this study and the systematic review of 117 empirical studies (see Table 14). For instance, the terms self-efficacy and motivation came up within both areas of research and there is similarity of terms between goal orientation and goal clarity. In addition, the importance of interpersonal attraction highlighted in the research by Bozer and Jones (2018) (meaning: “*why human beings have a natural tendency to identify and attract with individuals perceived similar to themselves*” (Bozer and Jones, 2018, p. 352)) tallies with the research theme: “coaching relationship” which was highlighted as a foundation factor to coaching efficacy. Also relating to this theme is the feedback process apparent within the skills of the coach where participants can talk, be listened to (and receive feedback or validation) as a key process within coaching.

Bozer and Jones (2018) Factors determining workplace coaching effectiveness	Comparison to research findings – factors impacting perceived workplace coaching efficacy
self-efficacy	Self efficacy, resilience
coaching motivation	Motivation, Readiness for coaching
goal orientation	Goal clarity, awareness
trust	Coaching relationship, Environment
interpersonal attraction	Coaching relationship
feedback intervention	Coach skills
supervisory support	Obstacles to efficiency (see below)

Table 14: Comparison of findings to previous literature by Bozer and Jones (2018)

While each of the seven areas highlighted by Bozer and Jones (2018) provide insights into the determinants of workplace coaching effectiveness, they also highlight several of the outcomes from coaching which offers further evidence as to the benefits of coaching and particularly ongoing coaching which builds upon these determinants and further increases efficacy.

What the systematic review hasn't highlighted are the factors that contribute towards coaching efficacy (rather than determine it), this is where the research here adds value to the existing literature. For instance, within the review by Grover and Furnham (2016) while no specific conclusions could be made about the mechanisms underlying coaching, they did suggest that they fitted under three stakeholder headings: the Coach; the Coachee and the relationship

between the two. While this is a useful lens to view the contributory mechanisms, it is suggested here that the workplace also has an important part to play within the underlying mechanism. The relationship between these four factors is outlined in Figure 54 along with the suggested underlying causal mechanisms that fit within each aspect.

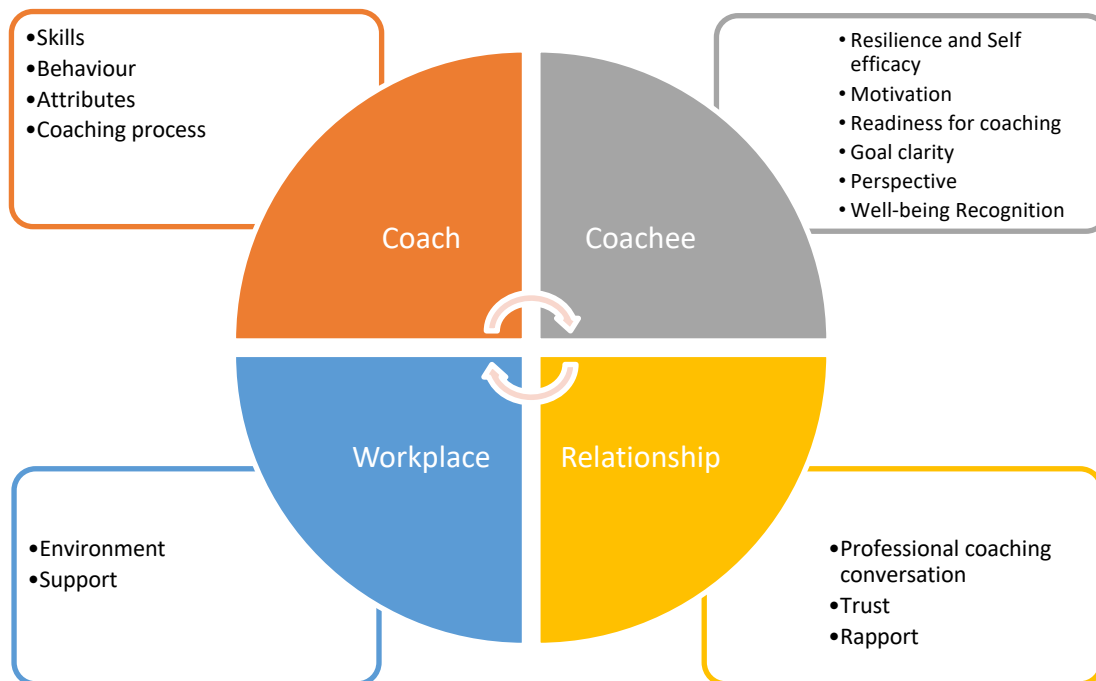


Figure 54: Contributors and determinants of coaching efficacy (© Sydenham, 2020)

The contributors and determinants of coaching efficacy are further highlighted from the participants point of view who reported that the experience of coaching was part of its effectiveness, for instance to have a coach with whom they felt a connection and who was positive, professional and challenged them whilst also providing support, improved their awareness about their well-being by giving them space and time to talk, identify and challenge goals and feel listened to. This resulted in achieving their goals/outcomes, increased awareness and improved well-being. The general response was very positive based on several outcomes gained from the coaching including achieving goals/outcomes,

increasing awareness and improved well-being: *"It was very effective...we were both so pleased with what I had achieved...I honestly can't tell you how much my life has changed in the past 6 months, really positive"* (CEE14). The majority of participants felt that their well-being had increased over the coaching period and were very positive overall: *"I just think it's amazing, everyone should have it"* (COA5).

In spite of the perceived effectiveness of coaching, participants raised several obstacles to coaching and situations where they felt it was not appropriate, in this sense it can be seen how the contributory factors to coaching efficacy can also become barriers. These have been discussed in the findings relating to the workplace; the coaching relationship and situations where coaching was not appropriate. While these factors could certainly impact the outcome of the coaching, they don't refer to the ability of coaching in the sense of judging coaching efficacy.

Taking into account each of the above sections, it is to be concluded that based on the findings throughout this research and supporting literature, the processes, causal mechanisms and outcomes from coaching suggest that workplace coaching is an effective methodology for improving the mental well-being of employees. The efficacy of workplace coaching is summarised in Figure 55, demonstrating not only the foundation factors that are important but furthermore, the process of coaching that aids mental well-being; and the causal mechanisms that are responsible for personal and external well-being outcomes.

Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

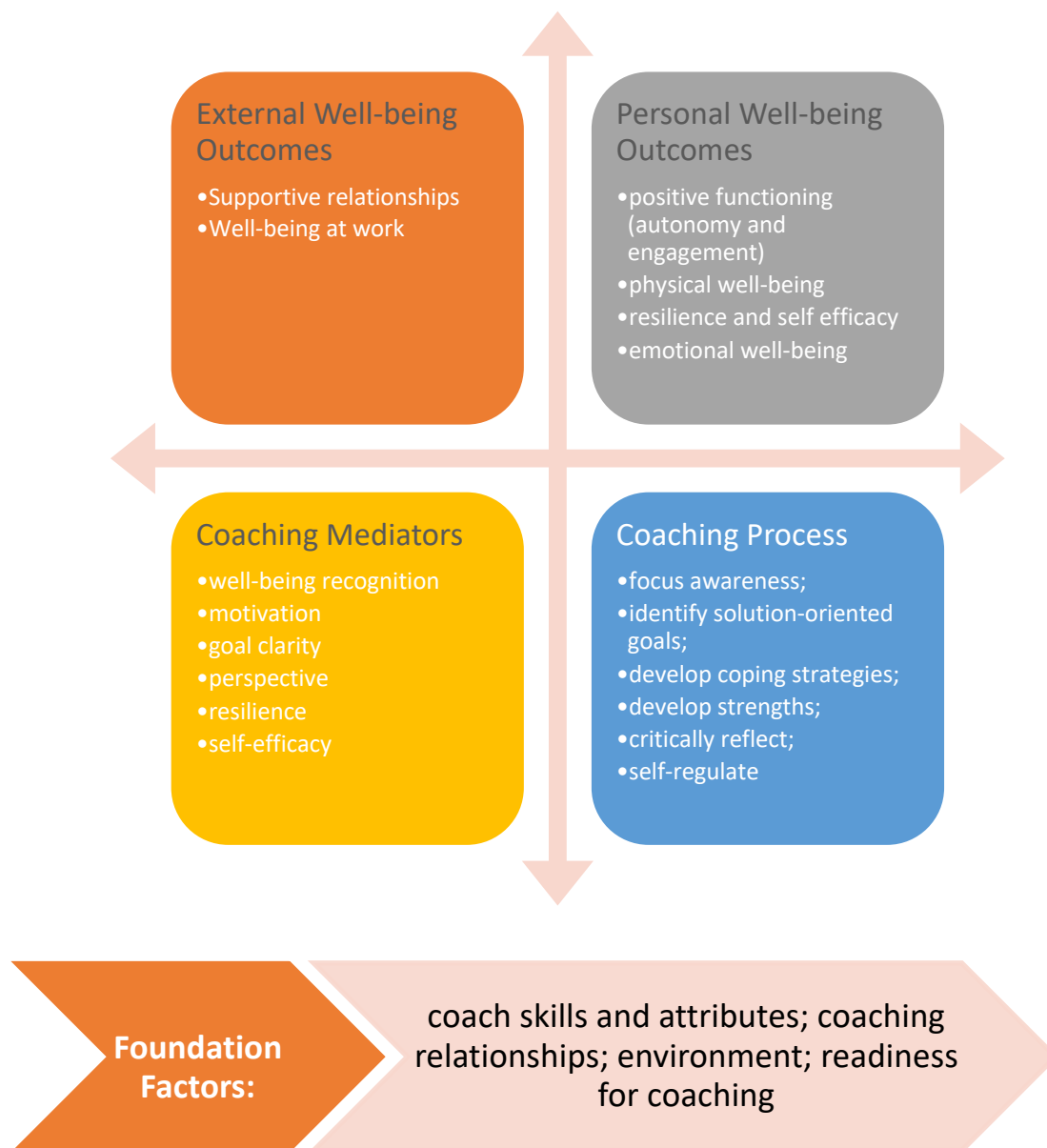


Figure 55: Mental well-being coaching efficacy (Sydenham, 2020)

5.5.5 Limitations

The limitations of each of the separate questions have been discussed throughout this chapter however there are some limitations to consider in light of the conclusions made within this section. A decision has been made at the start of this section that efficacy was to be judged based on the combination of the three contributory factors: does participants well-being change; what are the changes; and what are the contributing processes and causal mechanisms. It has also been decided that efficacy would be evaluated in terms of the ability of coaching to result in the desired outcome. Each of these decisions will have had implications on the conclusions that have been drawn and it is likely that other researchers may draw upon other methods and subsequent conclusions. However, the conclusions have been made with best interest based upon the understanding of the findings in light of the existing literature. This draws particularly upon the transfer of knowledge within coaching; the importance of resources within the definition of well-being; and the judgment of factors impacting upon efficacy as causal mechanisms of change. These conclusions are based upon an understanding of the theoretical underpinnings of behaviour change; positive psychology and adult learning. As stated in the literature review, this research has been positioned within the theoretical framework of positive psychology in particular. A potential limitation of these conclusions may be that a theoretical underpinning of behaviour change or adult learning theory may have resulted in a different understanding and this would provide an interesting focus for future coaching research.

5.5.6 Implications

This section has several contributions both to the existing literature base and theoretical framework but also to well-being and coaching practitioners as well as to workplaces, these will be discussed in more depth in the conclusion chapter but are included briefly below.

The first contribution is regarding the definition and content of coaching for mental well-being. As has been seen in the literature, there is a growing interest in health coaching and well-being as part of this but also more widely in terms of well-being in the workplace. Throughout this section, a greater understanding of the definition, content and positioning of workplace coaching for mental well-being has been presented especially in light of the contribution of education in raising awareness, understanding and recognition of well-being. This has implications not only for coaching practice but also for workplaces in the design of their well-being interventions and how they fulfil the need for education, self-awareness and knowledge transfer around mental well-being.

Second, a clearer understanding of mental well-being has been presented that clarifies the roles of psychological and subjective well-being as well as the amalgamation of work well-being and satisfaction with life into “worklife well-being”. It is suggested this better represents the blended nature of the subsequent components. Finally, an additional “resources” section is included within the model which highlights the importance of the causal mechanisms of change.

Third, in light of complimentary systematic reviews of the literature, the contributors and determinants of workplace coaching efficacy were discussed and suggested that the causal mechanisms are divided into stakeholder headings that represent the responsibility of the coach; coachee; workplace; and relationship between each of these factors. This is different to previous research which has tended to ignore the role of the workplace when considering coaching efficacy.

Finally, a model of mental well-being coaching efficacy is presented. This presents a clear picture of the relationship between coaching and well-being outcomes, taking into account the causal mechanisms of change as well as the wider key benefits. The contribution of this model is that it demonstrates a direct relationship between coaching and well-being and can be used not only by workplaces to guide well-being activities and strategies but also particularly as a guide for designing future coaching interventions and certainly as a starting point on which to build further research.

5.5.7 Conclusion

Throughout this section the factors impacting upon coaching efficacy have been discussed and the opportunity now is to conclude that workplace coaching is an effective methodology for positive changes to mental well-being. The reason is not only that coaching has been shown to result in positive well-being outcomes for participants, but fundamentally, because, supported by the foundation factors, the coaching process facilitates the causal mechanisms of the changes to mental well-being that were recorded. While coaching will certainly not be responsible

for every outcome, the design of the process in terms of the overall direction of coaching facilitates understanding, awareness and recognition of well-being; it offers perspective, builds motivation and resilience and offers clarity around goals; resulting in greater levels of self-efficacy and the result of all of this is greater well-being. For these reasons, coaching is deemed to have the ability to result in desired changes to well-being.

Chapter 6 – Conclusion

*“One day in retrospect the years of struggle will strike
you as the most beautiful”.*
(Sigmund Freud)

6.1 Introduction

The aim of this research was to determine the efficacy of workplace coaching as a methodology for improving mental well-being. Specifically, a programme of workplace coaching was devised in order to explore the changes that occur in mental well-being as a result of workplace coaching; and develop an understanding of the process of coaching and causal mechanisms that underpinned changes to mental well-being. These aims were achieved by undertaking a critical realist philosophy with mixed methods to assess not only the impact of workplace coaching on participants' mental well-being but also the causal mechanisms underlying reported changes.

6.2 Brief summary of the key findings

A review of the literature demonstrated that coaching has been found to have a positive impact on well-being outcomes however, understanding why workplace coaching works, presented an opportunity for further research which has been undertaken within this thesis. 47 participants were recruited and formed one of three groups (coaches, coachees, control). The coaches took part in a six-month blended learning coaching and training programme to equip participants in theories of well-being and models of coaching. The coachees were recruited by the coaches and undertook a minimum of 3 x 1.5hr coaching sessions but no

training. The Control group undertook no coaching or training intervention. All groups complete the National Accounts of Well-being Survey at the start and end of coaching; 30 participants voluntarily took part in semi-structured interviews; added to this, the coaches only, further completed a focus group and mixed-methods questionnaires throughout the programme. Results were analysed in terms of three research questions: Does participants' well-being change? What changes take place due to the workplace coaching? What are the causal mechanisms by which changes to well-being take place?

Analysis of the results demonstrated that there was a significant (positive) change to the well-being score of the participants compared to the control group across a number of areas. Specifically, it was discussed that coaching had a direct influence on: personal well-being; physical well-being; resilience and self-efficacy; emotional well-being and some elements of positive functioning (autonomy; engagement). Further to this, an indirect influence of coaching was found for the following well-being outcomes: well-being at work; supportive relationships; absence of negative feelings; competence. Finally, it was considered that coaching had a limited impact on the following well-being outcomes: satisfying life, trust and belonging; optimism, and meaning. Differences were also recorded between the participant groups with coaches demonstrating a higher well-being score at the start and end of the research, however with the coachees demonstrating a significantly greater improvement to their well-being score overall and for the specific areas of personal well-being; satisfying life and engagement.

Qualitative analysis reported the causal mechanisms that were interpreted from the results. These were reported in terms of: the qualities, attributes and structure of the coaching; the coaching process; and the mediators of coaching. This demonstrated that the qualities, attributes and structure of coaching that were important were: supportive (challenge); listening skills; professional conversation; space, time and location of coaching. The process of coaching that was found to be beneficial was: develop awareness; identify solution-oriented goal; develop strengths and coping strategies; critically reflect; focus on well-being; self-regulate. Finally, the coaching mediators were ultimately described as the causal mechanisms of the changes to well-being were reported as: well-being recognition; perspective; goal clarity; resilience and self-efficacy; and motivation.

Results have demonstrated that participants well-being improved as a result of workplace coaching with changes seen particularly in the area of personal well-being. Furthermore, that the process of coaching has been outlined to identify the causal mechanisms which underpin the recorded changes suggesting that participation in well-being coaching results in greater recognition of well-being which supports the coachee to identify and clarify their goals. Finally, that as an outcome from the coaching, coachees build their resilience and self-efficacy, gain perspective on their well-being and are given the tools and motivation to monitor and evaluate their progress. It has therefore been concluded that workplace coaching is a suitable methodology for improving the mental well-being of employees and an outline of the causal mechanisms have also been identified. This contributes to the understanding that coaching improves mental well-being and also demonstrates how coaching works.

6.3 Contribution to literature/theory

As has been discussed, the coaching literature, whilst growing in rigour through the use of systematic reviews and randomised controlled trials, had yet to confirm the efficacy of coaching specifically on mental well-being and in particular to determine the underlying causal mechanisms that were responsible for changes to well-being. Throughout this thesis several contributions have been discussed in relation to theory, literature and practice with respect to the above. This section will now consider each of these contributions in turn.

6.3.1 Contribution to theory

Within the literature review an overview of the contributing theory relating to both coaching and well-being was discussed. This outlined that the theoretical foundation for this thesis was within positive psychology but also influenced by behaviour change and adult learning theory. Previously literature focusing on well-being has been rooted in psychology and provides an outline of the definition and content of well-being in terms of subjective or psychological well-being. Added to this are the theoretical foundations of workplace well-being which is found within the theories of learning and development and management of well-being at work. The contribution of this research is that it combines these foundations and harmonises the growing recognition of mental well-being in the workplace encompassing both the feeling good and functioning well aspects of well-being. This more accurately reflects the nature of human flourishing and demonstrates the link between flourishing people and thriving workplaces. A model has been presented based on new and existing literature to outline a fresh perspective on the components of mental well-being and fundamentally the blend

of work and life well-being along with the resources required to instigate and sustain understanding, awareness and recognition of well-being.

The second contribution to theory lies in the definition and understanding of coaching and well-being coaching in particular. Coaching has been defined as *a collaborative process by which the coach facilitates self-awareness, responsibility and well-being, which contribute towards goal attainment and flourishing of the client*. This highlights within a general definition of coaching that well-being is facilitated by the coach and that goal attainment and flourishing are outcomes from the coaching. The contribution therefore is the inextricable link between coaching and well-being and this is further emphasised by the outlining of the coaching outcomes detailed in the models provided within the research. While a few researchers have made previous contributions in terms of the determinants of coaching efficacy, this research hones existing and new research into coaching efficacy and very specifically into the application of mental well-being.

6.3.2 Contribution to literature

The findings presented throughout this thesis combined with the discussion of existing literature provide further evidence of the positive impact of workplace coaching on the mental well-being of employees. This research reinforces previous findings that coaching results in favourable outcomes in relation to goal attainment, resilience and self-efficacy, reduced stress and anxiety, supportive relationships, satisfying work, autonomy, and emotional well-being. Added to this, the research has demonstrated a further positive impact of coaching on physical well-being (vitality), work-life well-being, competence, and engagement

which have previously only been demonstrated within theory or non-coaching research. The research also uncovered areas where the impact of coaching was limited. This highlights that within this research, greatest impact was demonstrated in the area of personal well-being and that it was harder to impact factors of well-being outside the control of the coachee, for example satisfying life.

This research has to the researchers knowledge being the first to specifically consider the impact of a coaching for well-being programme on coaches as well as coachees. This has highlighted that the coaches had a higher starting and finishing score of well-being implying that being a coach creates the skills and conditions to self-manage well-being.

Previous literature (Leedham, 2005; Jones, 2015) suggest factors that form the foundations and outcomes of coaching. The research presented here adds to the previous research and suggests that responsibility for coaching success sits with the coach; the coachee; the workplace and the relationship between each of these factors and that there are several contributors and determinants of coaching efficacy within each of these factors. Furthermore, the personal benefits have been clarified and re-classified as the causal mechanisms, or resources required to instigate and maintain well-being change. In that sense, this research contributes to the literature by recognising the causal mechanisms within coaching that are responsible for changes to well-being and these have been outlined in detail.

The existing field of coaching research is focused heavily around the use of the cognitive-behavioural solution-focused (CB-SF) model of coaching. Within this research, alignment between non-specific styles of coaching and the CBFS model is outlined. Furthermore, a model of the process of well-being coaching is proposed with six stages of coaching to result in changes to mental well-being. This is the first model to be presented in the literature to reflect the coaching for mental well-being process and underlying causal mechanisms (coaching mediators).

6.3.3 Contribution to practice

Coaching is rapidly growing in popularity yet while the evidence base has also grown, it does not match the growing number of coaches worldwide and therefore there is a need to continue to build evidence-based practice and systematic reviews of its efficacy. The research presented here has several implications for developing and improving coaching practice and workplace coaching practice in particular. Primarily, a contribution has been made in terms of the favourable outcomes of workplace coaching on mental well-being and therefore the suggestion that workplaces should consider coaching among their interventions to encourage and support well-being in the workplace. Added to this, the benefits to supporting the training of workplace coaches to not only support the well-being of others, but to develop the skills needed to self-manage well-being, have been outlined.

The importance of awareness, recognition and understanding of well-being has been highlighted as an outcome from this coaching programme. This provides a

distinction between coaching and well-being (or health-related) coaching because the latter is underpinned by the contribution of education whether formal or informal. This has implications for practice because (a) workplaces can consider the role and format of education within well-being interventions and (b) coaches will need to raise their understanding of well-being in order to support their coachees in this respect. This is different to typical forms of coaching and would present a shift in the understanding of coaching, moving it closer to mentoring (where the mentor is expected to be more knowledgeable than the mentee about the subject and therefore can impart some of that knowledge to their benefit). This research has not been explicit in how the information should be delivered, merely that it is the inter-relationship between education; reflection and knowledge transfer through the process of coaching questions that results in greater awareness, understanding and recognition.

Two specific models have been proposed which can guide coaches and workplaces: A coaching for mental well-being model has been proposed that can guide practitioners and managers in the factors that need to be in place within a coaching programme. Added to this, an awareness of the coaching outcomes that are instrumental in well-being have been provided so that coaches can tailor their own processes and style with an awareness of these components. The second model that has been proposed is the mental well-being coaching efficacy model which outlines each of the components of coaching whilst also drawing conclusions to not only the personal well-being and coaching outcomes but also to the external outcomes; this consolidates the link between well-being being good for individuals, workplaces and society.

6.4 Limitations

It is to be expected that a project of this size and duration will contain several limitations not all of which will have been able to be overcome within the research design. Each of the limitations of research will now be discussed in turn. While the coaching literature is growing rapidly, there is not enough research to determine conclusively whether coaching has a positive impact on mental well-being. While the research discussed throughout this thesis contributes to the existing literature, further randomised controlled trials and fundamentally, systematic reviews, would need to be undertaken in order to determine conclusively the impact of coaching on mental well-being.

The primary research presented here provides evidence of the impact of coaching on mental well-being within the workplace context and therefore may not be generalisable outside of the workplace however combined with the existing literature suggestions can be made about the wider application and benefits of coaching.

This research benefited from a mixed methods approach which offered insights to determine whether changes to well-being were recorded whilst also gaining rich data about the outcomes and underlying causal mechanisms. While quantitative data analysis can provide clearer conclusions about the significance of those changes, this is more difficult to determine with the qualitative data. A decision had to be made about the relevance of the qualitative data and how this corresponded to the quantitative data. It is likely that other researchers would interpret the data differently. In order to reduce bias a consistent method of

classifying the themes was applied. Furthermore, the research programme did not place restrictions on the style or content of the coaching, and it is therefore more difficult to determine the associated processes of the coaching that result in well-being outcomes. However, the advantage of this design was that it gave an open platform to uncover and discuss coaching processes and causal mechanisms.

Similar to the above, the adoption of a critical realist approach to research entails the researcher playing an active role in the interpretation of the data and therefore is open to subjectivity. The identification of the causal mechanisms was an organic process which arose from the repetitive comments of participants detailing outcomes from coaching, but which didn't fit the definition of well-being. In that sense some of the answers from the research questions were reconfigured as causal mechanisms and not well-being outcomes.

Perhaps one of the most difficult limitations to overcome is the question of causality. As mentioned, randomised controlled trials and higher participant numbers improve the probability of causality which was not possible within this research. In order to reduce the limitation of this, a control group was recruited, and a mixed methods research approach meant that the data could be cross-referenced to confirm or deny questions of causality. However, there is the further added complication that the research with the coaches involved coaching and training. This could be considered a limitation because causality cannot fully be determined due to the amalgamation of these two forms into a blended programme (of which the research aspects also formed a part and could further

have influenced the results). In order to overcome this limitation, coachees were also recruited who didn't participate in training or mixed methods questionnaires and as discussed in the results, both sets of participants' well-being increased. Looking back to one of the research aims; to understand the processes and causal mechanisms of coaching, in order to achieve this, it was necessary to consider how coaching works and what detracts or contributes to its efficacy. Therefore, while the research could have been undertaken differently, it was felt that by training the coaches in theories and practices of coaching and well-being, they could

- (a) improve their knowledge;
- (b) relate their understanding to their own well-being
- (c) utilise their understanding to support their coachees
- (d) reflect on their experiences in order to inform the research

It could have been questioned why training didn't form part of the whole research process and this again comes back to the research aim: to determine the efficacy of workplace coaching on the mental well-being of participants (not to determine the efficacy of well-being coaching). Therefore, while the coaches were trained in the application of coaching techniques that would support well-being, they were qualified as coaches and therefore free to use any coaching process they deemed fit in their coaching sessions. Ironically, what has come from the research is the difference between coaching and well-being coaching and suggestions of the causal mechanisms of coaching to improve to well-being which subsequently turns the coaching from generic into specific. Whether these

same causal mechanisms would be applicable to other applications of coaching e.g. career coaching, is an area for future research.

As discussed, some of the participants were coaches within the organisation and self-selected onto the programme. The nature of self-selection is that they could have been particularly motivated to improve their well-being but furthermore as coaches, will likely have predisposed them to favourable opinions, knowledge and skills in coaching (including the possibility that they were self-coaching). Added to this, previous research demonstrates that results may be subject to bias based on a desire to provide favourable outcomes. This was in some ways overcome by the use of the control group and cross referencing the mixed-methods findings. This is also a limitation because without full probing across each research component, exclusion of certain items could imply a lack of significance. The results were interpreted cautiously in order to account for this.

The focus of this thesis has been on the efficacy of workplace coaching. A decision was outlined that efficacy would be judged in terms of whether participants well-being changed; what those changes were; and the contributing processes and causal mechanisms in order to decide whether coaching had the ability to result in the desired well-being outcomes. Each of these decisions has guided the research in a particular direction and this is further influenced by the positive psychology theoretical framework. The choices around this design may have limited the research direction but have also enabled a focused view which has been influenced by the guiding literature and theory.

6.5 Implications

Well-being: *“an ultimate goal of human endeavour”*

(Michaelson et al., 2009, p. 9).

This thesis started with an outline of the importance of mental well-being; mental ill-health presents significant concerns in terms of human, social and economic costs and the health of the working age population is a particularly key area with recognition that being in work is good for health and psychological well-being. While well-being has been brought up the agenda, it deserves recognition as the primary aim for governments, workplaces and individuals. What the research throughout this thesis has achieved is to offer a methodology that can be adopted throughout workplaces with potential benefits across the working age population. Coaching as part of an effective workplace well-being programme can deliver opportunities for employee flourishing and thriving businesses. This research compliments existing literature about the factors that contribute towards workplace well-being whilst providing further guidance for individual led outcomes and how they can be achieved. If employees can understand the importance of mental well-being, recognise their own levels of well-being and are aware of their resources for managing it, a small shift in psychological resources could produce large increases in the percentage of people who are flourishing. Furthermore, the self-regulating nature of coaching means that the coachee becomes their own coach and thus personal responsibility for well-being is gained, resilience is increased, and performance is improved. A society that flourishes is at the heart of every success; well-being needs to be the central focus for every major decision and once this is recognised, greater business, personal and societal

outcomes can be gained. This research is one small part of a much bigger picture, much of which is already an improvement on 10yrs ago, so what now? Work related stress, anxiety or depression accounts for over half of UK sickness absences from work and as quoted by the TUC General Secretary Frances O'Grady, the "epidemic" is on the increase (Makoff-Clark, 2018). The issue is no longer about recognising that we have a problem, it is about understanding how we can fix it. Coaching is not the only way to increase employee flourishing, but the data shows that the situation is not getting any better and if employee well-being is going to increase, the focus has to shift to what works and how; the research presented here, provides guidance about how that can be achieved.

6.6 Future research

The research presented here has made several contributions to theory, literature and practice but this is just the start of what will hopefully be ongoing development in the field of positive psychology, coaching psychology, and adult learning theory combined with employee engagement and motivation studies. To that end there are several key areas identified within this research that offer potential for further research:

1. While stress and well-being as terms are used interchangeably, there is a marked difference in the studies which consider the impact of coaching on each of these areas, with more favourable results found for well-being focused studies. It would provide a beneficial contribution to the existing literature to consider the same coaching intervention on each of these outcomes to explore whether for instance the causal mechanisms that are responsible for changes to well-being apply to changes to stress;

2. The coaching model that was devised as a result of the research has naturally not been tested as it was created retrospectively from the findings. It will therefore benefit from being subject to further research under randomised controlled trials in order to determine the process and causal mechanisms and resulting impact on mental well-being or other coaching outcomes. Similarly, the findings by Bozer and Jones (2018) suggesting the determinants of coaching efficacy could be considered alongside this research in order to gain specific clarity about the causal mechanisms of changes to well-being;

3. Longitudinal research is beneficial because it adds to the literature about the long-term implications of an intervention. Coaching research is severely lacking in longitudinal research designs and especially ones that consider the associated change process e.g. behaviour change; well-being changes, sustainable changes and the impact on the workplace. Research of this type would add to the evidence base underpinning coaching practice.

4. It was not an aim of this research to identify the impact of coaching on workplace well-being however, if the business case for investment in coaching interventions is going to be well received, the evidenced-based link between coaching, well-being and business outcomes needs to be made explicit. Further research which pulls all of these aspects together within a variety of workplace settings will demonstrate the potential impact of workplace coaching;

5. While this study has outlined the causal mechanisms of workplace coaching for well-being outcomes, it would be interesting to research whether these are the same causal mechanisms for other coaching outcomes and therefore become more general mechanisms for coaching efficacy, the application of these outcomes is yet to be more widely determined.

6. It has been discussed within this research that possibly being a coach predisposes a higher level of well-being. A high level of well-being for the coaches has been demonstrated within this research but would need to be studied in more detail in order to make further generalisations about the benefits of being a coach. It would need to be deciphered whether it is the knowledge gained through the coach training; the continual “self-coaching” that takes place; or perhaps the application of continual learning from each coaching scenario, that benefits well-being outcomes.

7. The research undertaken here has benefited from a critical realist approach to the research which has enabled a retroductive approach to data analysis in order to uncover the causal mechanisms of well-being change. This philosophical approach is gaining in popularity but would benefit future researchers in the field of coaching in order to continue to explore the detail around “why coaching works”.

8. Finally, a suggestion has been made in this research, that well-being coaching in particular benefits from an education component to the coaching, which is different to more typical styles of coaching. Further research would benefit from considering coaching, training and combined methodologies to explore whether this really is the case and the parameters around this style of coaching.

6.7 Recommendations for policy and practice

There are several recommendations implied within this thesis, these will be outlined in terms of recommendations to Government; to Workplace; to Coaches/Coach Trainers and to Individuals.

6.7.1 Recommendations to Government

It is recognised that the Government has put many resources into improving the ill-health of the nation especially since the Black review in 2008. However, to focus on ill-health is only one side of the picture; the ONS statistics for 2016 suggest that the percentage of days lost due to sickness absence was 1.9% of the workforce. While this is still considerable in terms of cost, it is suggested that putting 100% of resources into 1.9% of the workforce is non-sensical. There is a thin line between those who are languishing in work and those who move into sickness absence. While workplaces have a large role to play when it comes to keeping people in good work, this can better be achieved with the support and acknowledgment of Government policies and initiatives. The recommendation of this thesis is that resources with a wider scope than mental ill-health are provided to the “working well” so that employees develop the knowledge and strategies to keep them well at work. Furthermore, that this is carried out alongside existing advice and initiatives about good work and services to support people who are absent from work whether in the short or the long-term.

6.7.2 Recommendations to Workplaces

Workplaces have a heavy burden when it comes to managing ill-health at work: the costs are considerable; the repercussions are costly; and the duty is legal. Yet, the rewards far outweigh the responsibility. The Association of Accounting Technicians (AAT) commissioned a study that demonstrated that we will spend on average 3,507 days at work including 204 days of overtime during our life-course. This represents a significant proportion of our lives and suggests that: *“The impact our jobs have on our lives spreads far beyond the workplace”*

(Bailey, 2018). The recommendation here is that, while it has been said before, business success can be gained by recognising that employee well-being should be the number one priority and that as said by Bob Chapman with regard to the guiding principles of leadership at Barry Wehmiller: “*we measure success by the way we touch the lives of people*” (Chapman and Sisodia, 2015, p. 53). People go to work for more than monetary return and if businesses are truly going to be successful, the well-being of the people in that business has to be made a priority and this is done by focusing on more than mental ill-health. The adoption of interventions such as coaching within workplace well-being strategies will facilitate the growing well-being of employees and therefore result in returns for the business and wider economy. The recommendation is that if you want your business to thrive, look first to the health of your key stakeholders: the workers.

6.7.3 Recommendations to Coaches/Coach Trainers

This thesis has made several contributions that could impact upon coaching practice and coach training. Whether working within or external to a business it has been suggested that well-being is a core outcome of coaching and should be considered within the key aims of coaching. Furthermore, it has been suggested that education plays a key role within well-being coaching. Therefore, it is a recommendation that coaches recognise the key role that they play in the well-being of the people they are coaching and if they specifically want to target this outcome, several causal mechanisms identified in this thesis can guide them in their practice. Added to this, coach trainers are provided with a suggested model of coaching that can be utilised in the training of new and existing coaches if they want to adapt their practice to target well-being outcomes. Ideally, this model will

be utilised for evidence-based practice in order to contribute to the ongoing literature supporting coaching and coaching outcomes and coach-researchers are encouraged to utilise the findings from this research in taking the coaching literature forwards.

6.7.4 Recommendations to Individuals

This thesis has been guided by individual outcomes from the coaching, it has focused on individuals in the workplace rather than measuring the business outcomes. An evidence base for the efficacy of coaching on mental well-being has been provided along with the causal mechanisms that can guide individuals in managing, maintaining and improving their mental well-being. The recommendation to individuals is to recognise that mental well-being is not a fixed asset and through the use of coaching, individuals can make improvements to their mental well-being which can result in mutual benefits to their workplaces and society.

6.8 Personal Reflection on Research – a Practitioners Account

Introduction

I have been working as a professional coach for 15 years and during this time, I have undertaken over 2000hrs of coaching practice. This experience has given me a vast amount of experience and alongside this, I have been also been working as a qualified HR Practitioner, where I have developed my understanding, appreciation and recognition of well-being at work. This interest led me to specialize in well-being as a coach and ultimately to undertake the research demonstrated within this thesis. Over the course of the Ph.D., I have continued to coach people on a weekly basis and in this section, I would like to reflect on the relevance of my research on the work I undertake professionally and to consider my personal insights into the cross over between practitioner and researcher. In order to conduct this reflection, I would like to use Gibbs (1988) model of reflection (see figure 56) and I will discuss each stage of the model in turn.

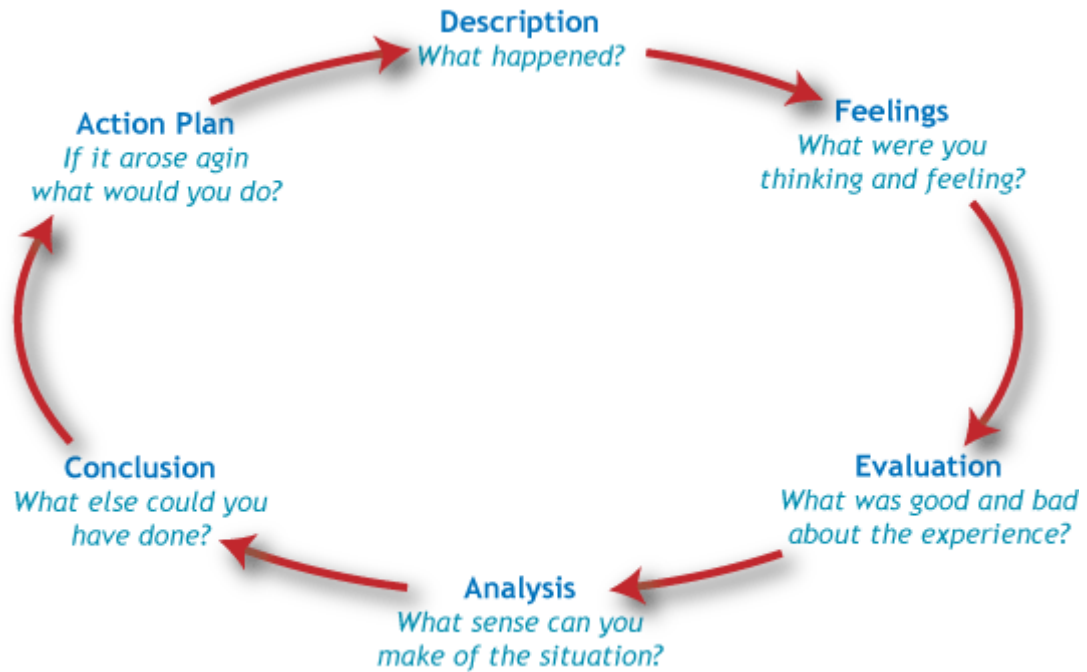


Figure 56: Gibbs' model of reflection (Gibbs, 1988)

Description

As discussed in Chapter 4, this thesis has presented several findings that are particularly relevant to Coach Practitioners. Within this reflection, I want to focus predominantly on the findings related to the coaching process, the coaching mediators and the relationship to well-being at work. This outlined that a coaching process which included the following stages:

- Focus awareness;
- Identify solution-oriented goals;
- develop coping strategies;
- Develop strengths;
- Critically reflect;
- Self-regulate

Contributed towards well-being recognition; motivation; goal clarity; perspective; resilience; and self-efficacy. These in turn underpinned well-being outcomes: positive functioning; physical well-being; resilience and self-efficacy; emotional well-being; supportive relationships; and well-being at work.

During my own coach training and post-qualification, I have learned a variety of models for use during a coaching session. I have found that as a coach, the models help to guide the sessions, provide structure and positive outcomes. I have also noted the positive effects that coaching in general can have on well-being outcomes.

Feelings

When I started the Ph.D., I imagined that it was the coaching models and process that resulted in well-being outcomes and I have now come to appreciate the importance of the coaching outcomes from that process i.e. the mediators, and the role they play in improved well-being. As a practitioner, I do not believe that there is only one way to achieve positive well-being outcomes from coaching and that the coaching model proposed in this research is one of many ways to achieve well-being. As a researcher, I can now see that our attention should be drawn to the coaching mediators from which purposeful change can be achieved. This is exciting as a practitioner because for the first time, I have a grasp of how coaching achieves its results, I not only know what I am looking for in terms of the well-being outcomes, but I understand what underpins this change in coachees. This

gives me great flexibility in my coaching because I can choose how I coach in order to work towards those outcomes.

Evaluation

When I reflect on the way I carry out a coaching session now, I can see the synthesis with my research; there are several central components that are common within the majority of my coaching sessions and these are reflected within the coaching process outlined. For instance, in relation to the first aspect of the coaching process (focus awareness) I believe that coachees need to understand what well-being means for them and how to recognise it, so that they can then take action to improve it. I will often start by educating a coachee on the foundations of well-being and then support them in expanding and developing their own awareness so that they begin to understand how to improve it. This has been a key contributor to my coaching style and focus in my own business, for me, everything is about well-being.

For the past 4yrs, I have been working with a company that specialises in supporting neurodiverse clients and within this type of coaching, further aspects of the coaching process are similarly replicated: These coaching sessions are very much focused around coping strategies and developing strengths, furthermore, having been initially trained in the GROW model (Whitmore, 1992), my sessions always have an element of goal and solution focus. I also appreciate as a practitioner that people are very busy and that an element of coaching is to give people the time and space to focus on themselves, to critically reflect on

what is important to them and voice how they are progressing towards these goals. I love seeing in due course, the coachee becoming “the coach” and while I continue to be there to listen as required, the need for coaching ceases as the coachee monitors and evaluates their own progress towards their goals.

However, if I critically consider the findings, I am surprised that the research did not yield greater results for “meaning”. One of the key reasons clients outline as to why they want (life) coaching, is that they are looking for direction and meaning in their life. During a coaching session, we will spend time assessing what is important to them to give their life or work meaning and then progress towards clarifying this as a goal. Of course, a goal that isn’t values-driven, will be difficult to achieve in terms of motivation, therefore goal clarity is important as a coaching mediator, but this doesn’t necessarily reflect in well-being outcomes related to meaning. As stated in the discussion, perhaps it was the focus on well-being that meant a reduced impact in other areas such as meaning, however, as a core aspect of well-being, I would argue that exploring meaning within coaching, perhaps needs greater attention.

When I started the research, I thought that participants would explain to me which part of which model worked best for them to result in well-being outcomes. The reality of the research didn’t reveal such simplicity, but instead uncovered the causal mechanisms. I find this aspect very exciting; I have always “known” that coaching works but having put together both a coaching process and list of causal mechanisms, I can now see the relationship between what happens during coaching and how this connects to well-being.

Analysis

It should be noted that whereas most coaching models guide a single coaching session, the *Model of Coaching for Mental Well-being* doesn't work in the same way. For instance, a coaching session that covered all six areas would be very long indeed. In that sense, I can see it working in tandem with other coaching models and for me, providing a guide topic for each session e.g. developing strengths, which can then be built into the focus for a coaching session and applied across multiple types of coaching (not necessarily restricted to well-being).

To outline how I have seen this work in my practice, I have recently worked with a coachee who had a diagnosis of Autism, she wanted as her outcome from coaching to recognise her needs around the diagnosis, develop her strengths and coping strategies. The first session was spent understanding her concerns and then building her awareness of her neurodiversity and associated needs, this enabled her to think clearly about what she wanted (stage 1). By the second session, she had quit her job and already had secured a new role; she understood what was important to her and was ready to focus more on understanding and developing her goals (stage 2). She was successful in her job application and the following several sessions were spent working on developing her skills and coping strategies for different topics e.g. interpersonal communication; personal values (stage 3). Each session, she would come back having reflected on the previous session, she was becoming clearer on what was important to her, how she could meet her needs and within the coaching, we were focusing on her skills, all of which was building her self-efficacy (stage 4). The coaching was giving her

that opportunity to critically reflect on her progress towards her goals and overcoming problems along the way (stage 5). As we draw closer to the end of the agreed coaching contract, she is now demonstrating a great level of self-awareness of her strengths, how she can work at her best, what she wants and is monitoring her progress each session (stage 6). While this coachee was not predominantly focused on her well-being, this inevitably became an outcome from the coaching and for me, this highlights the versatility of the model but also the impact everything we do as coaches has ultimately on well-being.

I am not surprised that coaching had a positive outcome on well-being overall, what struck me was the stark difference in the results with the coaches showing higher levels of well-being from start to finish. On reflection, this is perhaps not that surprising – As a coach, I consider myself to have a good level of well-being recognition, I regularly set myself goals, have multiple strategies which improve my resilience, I am aware of and use my strengths and then I critically reflect, monitor and evaluate on my progress which improves my perspective and motivation. Ultimately, knowing my level of well-being, brings me as a coach to want to do something about it (goal-focused). Therefore, it is now unsurprising that the coaches had a higher level of well-being. My hope is that more people develop coaching skills so that we raise the population of people who are flourishing.

I can see that each of the stages of the coaching model are applicable in the life-course of working with a coachee, but more fundamentally, I can also see the purpose of why we carry out various exercises, discussions and reflection – to

build: well-being recognition, goal clarity, resilience, self-efficacy, perspective and motivation. And this is why, for me, coaching works.

Conclusion

Throughout the research process, I was very conscious that as an experienced coach, it would be very easy to let my own thoughts and practices creep into the way I analysed the findings, as such it wasn't until very late in the process that I truly reflected on the relevance of the findings in relation to my own practice and whether they held true for me. To that end, I would like to reference Grant, Franklin and Langford (2002) to highlight the difference between self-reflection (inspecting and analysing my thoughts, behaviour and feelings) and self-insight (the clarity of understanding those thoughts, behaviour and feelings). Furthermore, that it is important to spend time, not only self-reflecting, but also building self-insight in order to enhance goal attainment and boost well-being (Grant & Selwyn, 2019).

That clarity for me now identifies I needn't be fearful of being an "expert" in the field; to ignore my own knowledge, experience and opinions, is missing an opportunity to bridge the contribution that can be yielded between both researchers and practitioners. This confidence will underpin being a research-led practitioner in the future or indeed an academic who has real-life experience. Furthermore, while different coaching models claim different outcomes, in essence, all coaching, as a purposeful change modality aims to enhance the client's ability to self-regulate (Keller, Eisen, & Hanss, 2019) and to improve well-

being (Grant & Selwyn, 2019). I have a blatant interest in well-being, as for me, all coaching is about well-being, whether we state it or not.

Action Plan

This research has fulfilled my personal aim which was to contribute to the coaching literature about the efficacy of workplace coaching, and to highlight a process by which we can improve people's mental well-being, pro-actively. Even in the process of writing this reflection, I have been able to synthesise my research findings and relevance to my own and others' coaching practice. I can confidently support my coachees to develop their own well-being and I plan to undertake further research to develop a greater understanding of these causal mechanisms - do they apply to different coaching outcomes? Do they hold true across multiple RCTs? Are they equally applicable to training as well as to coaching? Is there a correlation between well-being and coaching mediators? Most of all, I want to embed them within my own coaching practice and support people to flourish.

6.9 Final statement

The world is changing, if we are going to learn to not only survive but thrive as a nation, we have to learn to adapt to our environment, become resilient to challenges and prioritise our well-being so that we have the mental and physical resources in order to flourish. There is recognition of the importance of enabling people to manage mental ill-health and provide support for people to access the

healthcare and support services in order to, where possible, access or stay in good work, that is work that contributes to our mental and physical well-being. We know that well-being is important for ongoing success, but we have to recognise that we all have a role to play in managing, maintaining and developing our well-being so that we can fully function in our lives and in our work, we can contribute to society and live healthier, happier lives. This thesis has demonstrated more than just what well-being is; it has added to the growing evidence base of interventions such as coaching that show us how to improve our well-being. It is now the time to take responsibility for how we change our well-being; so that we control the health and happiness of how we live our lives, that we function positively in society, contribute to good work, and that we are happy in the widest comprehension of the term.

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Chapter 1 – Introduction

n/a

Chapter 2 – Literature Review

Well-being Interventions

Five Ways to Well-being

The following section explores each of the five ways to well-being and the relatedness in literature for the source.

Connect - According to the Foresight Challenge reports, the evidence indicates that “*Social relationships are critical for promoting well-being and for acting as a buffer against mental ill health.*” (Marks et al., 2008, p. 5). Evidence from the adult psychiatric morbidity survey shows the most significant difference between those aged 16-64 without mental ill-health is social participation (McManus *et al.*, 2007). In addition, research has found that happy people have stronger social relationships (Diener and Seligman, 2002).

In favour of promoting being **Active**, the Foresight report cited (Biddle and Ekkekakis, 2005) which showed that regular physical activity is associated with lower rates of depression and anxiety and a greater sense of well-being. Similar to the evidence around volunteering, it is not determined whether well-being

determines regular exercise behaviour or if regular exercise directly influences feelings of well-being. In addition longitudinal studies provide some evidence that physical activity protects against the onset of depressive symptoms and anxiety and cognitive decline in later life (Kirkwood *et al.*, 2008).

The evidence for **Take Notice**, is based on being aware of sensations, thoughts and feelings and the research shows that where this is trained over 8-12 weeks, well-being is enhanced for several years (Huppert, 2008). In addition being “mindful” has been shown by Brown and Ryan, (2003) as predicting positive mental states, heightened self-knowledge and self-regulated behaviour.

“For children, learning plays an important role in social and cognitive development. The continuation of learning through life has the benefits of enhancing an individuals self-esteem encouraging social interaction and a more active life” (Marks et al., 2008, p.9). Feinstein et al. (2004, 2008) show how adult **learning** has a positive correlation with well-being, life satisfaction, efficacy and optimism. Goal setting has been associated with higher levels of well-being. *“Both observational and experimental research suggests that the promotion of well-being is associated with goal-directed behaviour when the goals are self-generated, approach goals, and congruent with personal values”* (Marks et al., 2008, p.9). A study by MacLeod, Coates and Hetherton (2008) researched the effect of teaching participants goal setting and planning skills. Participants received three, one-hour group sessions or completed it in their own time. Both formats resulted in elevated well-being in comparison with those who didn't receive the intervention. *“Goal-directed behaviour has also been shown to have*

a positive impact on an individual's well-being, especially when the decision to engage in learning is concordant with intrinsic motivations and values" (Marks et al., 2008, p.9).

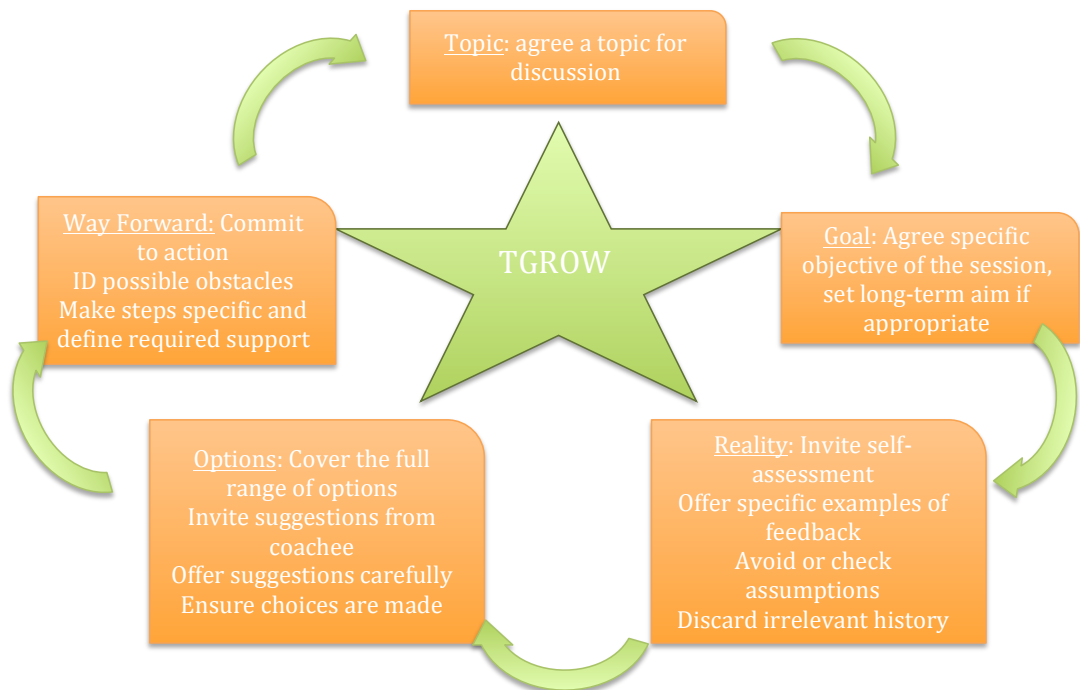
The final area of the Five Ways to Well-being is **Give**: *"Neuroscience has shown that mutual cooperation is associated with enhanced neuronal response in reward areas of the brain, which indicates that social cooperation is intrinsically rewarding"* (Marks et al., 2008, p.10). The Foresight report talks about mental well-being being enhanced when an individual is able to achieve a sense of purpose in society, hence contributing towards their community. *"So, helping, sharing, giving and team-oriented behaviours are likely to be associated with an increased sense of self-worth and positive feelings"* (Marks et al., 2008, p.10).

Core Coaching Models

T-Grow model of coaching

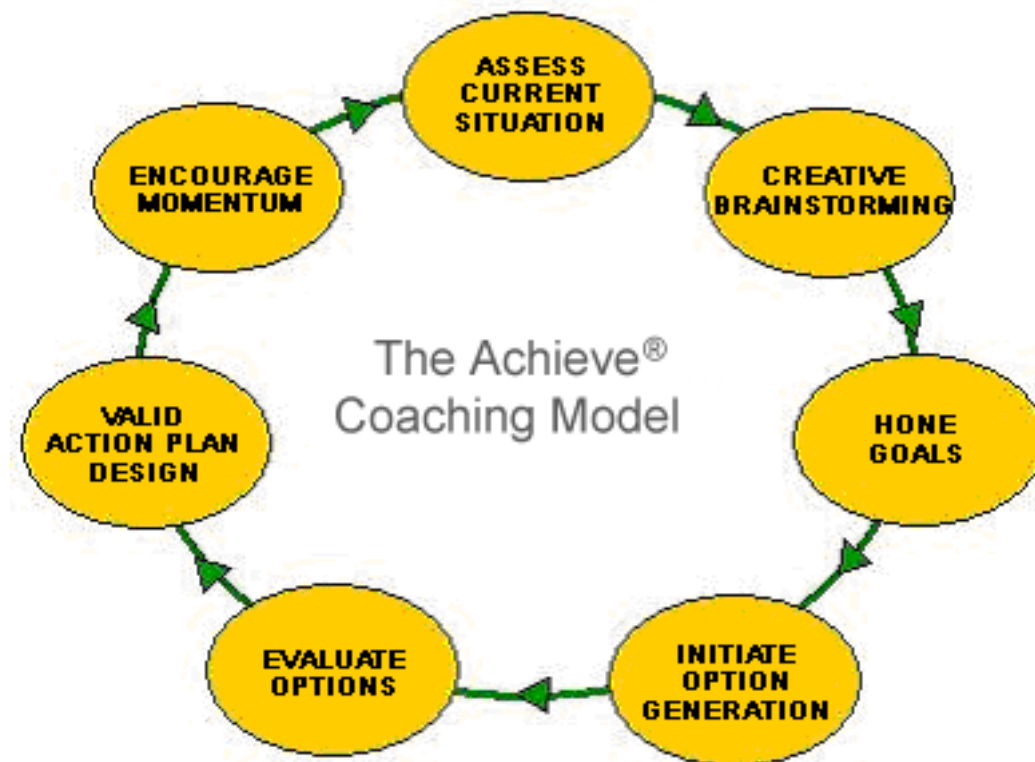
(Whitmore, 1992)

The TGROW Model



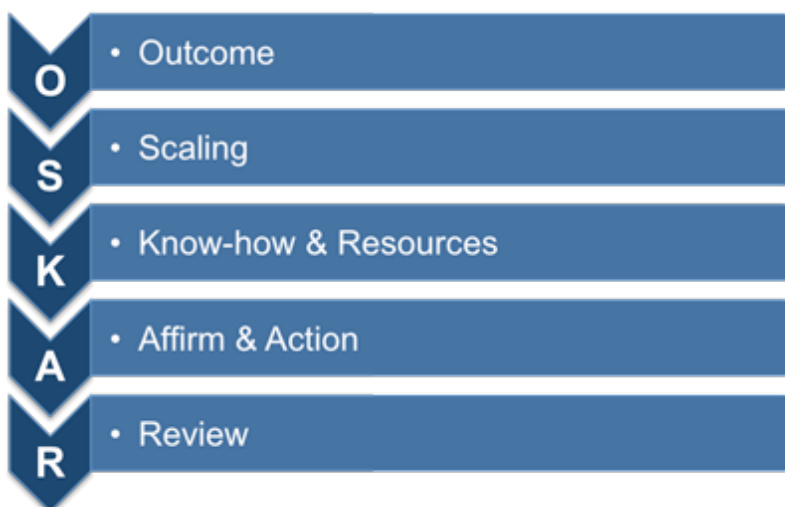
ACHIEVE

(Dembkowski and Eldridge, 2003)



OSKAR

(Jackson and McKergow, 2007)



SPACE

(Edgerton and Palmer, 2005)

- Social context;
- Physiology;
- Action;
- Cognition;
- Emotion

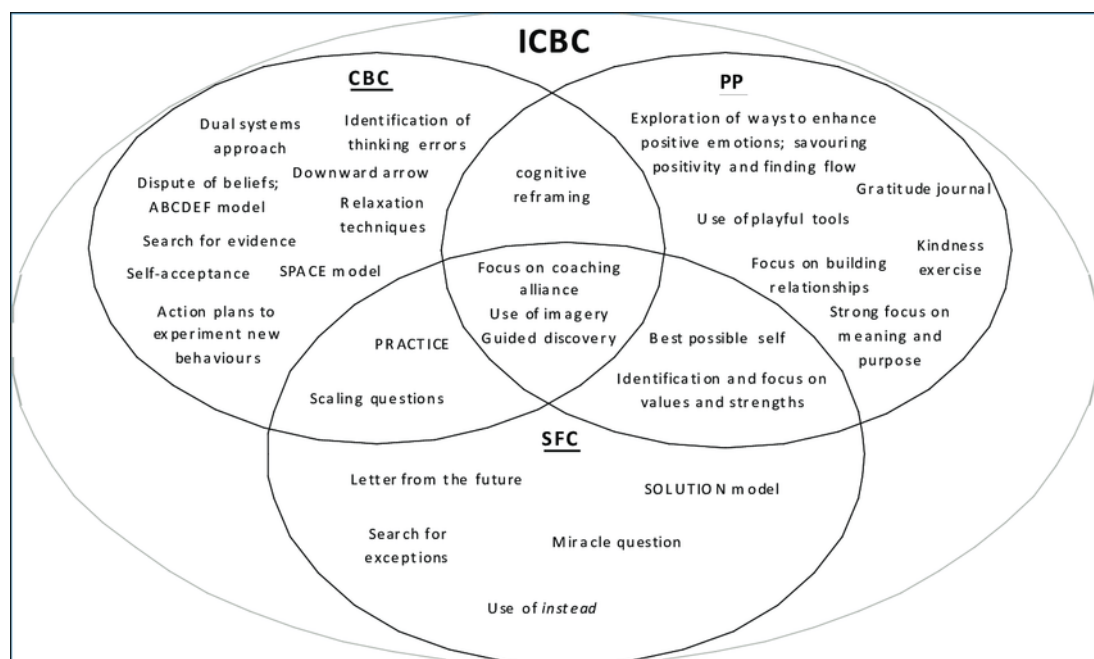
Plus two further components:

Action; Cognition; Emotion (ACE)

Physiology; Action; Cognition; Emotion (PACE)

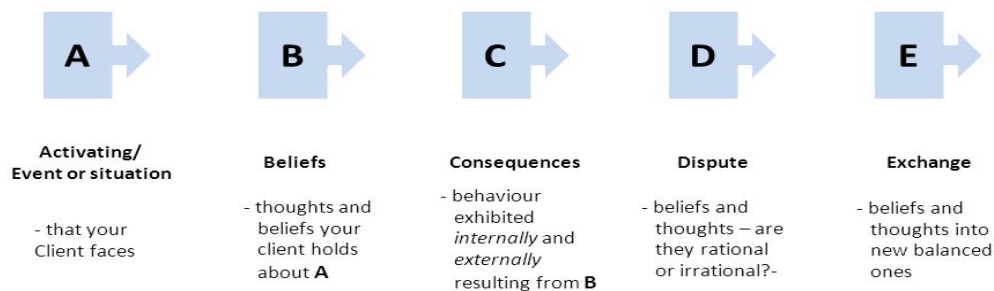
Integrative Cognitive Behavioural Coaching (ICBC)

(Dias, Palmer and Nardi, 2017)



The ABCDE Model of coaching

The ABCDE Model



Reference: Dorothy Spry – Cognitive Behavioural Pocketbook 2010

PRACTICE Coaching Model for Goal Achievement

(Palmer, 2007)

Steps

1. Problem identification

What is the problem, issue or concern? What would you like to change? Are there exceptions when it is not a problem? How will we know if the situation has improved?

2. Realistic, relevant goals developed (SMART)

What do you want to achieve? Select specific, measurable, achievable, realistic, time-bound goal(s)

3. Alternative solutions generated

What are your options? Write down possible ways of reaching your goals.

4. Consideration of consequences

What could happen? How useful is each possible solution? Weigh up the pros and cons. Use a usefulness rating scale: 1-10

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5. Target most feasible solution(s)

Choose the most feasible solution(s)

6. Implementation of chosen solutions

Break down the solution into manageable steps. Now go and do it.

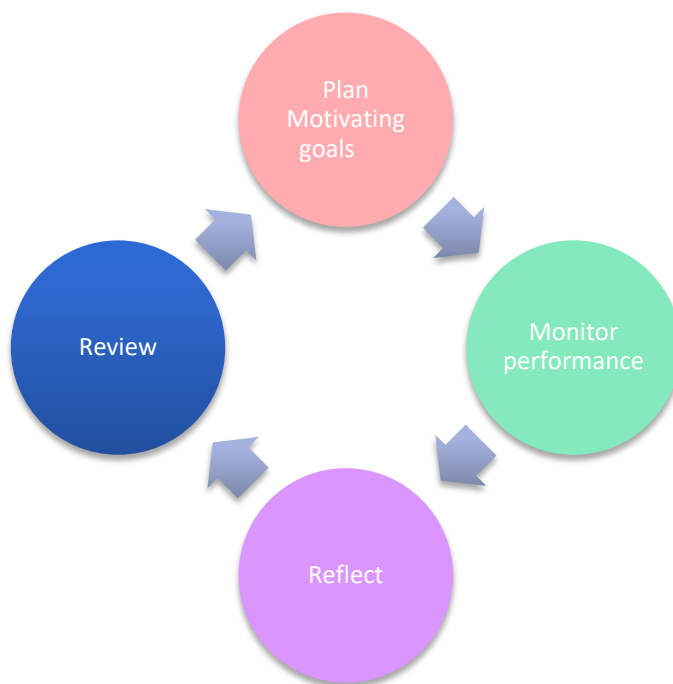
7. Evaluation

How successful was it? Use a rating “success” scale 1 to 10. Focus on your achievements: what can be learnt? Can we finish coaching now or do you want to address or discuss another issue or concern? Review and revise plan as necessary.

Self Regulation Cycle

(e.g. Gyllensten and Palmer, 2006)

Resilience is mostly learned, therefore a model such as the self-regulation cycle is helpful as it combines goal setting with monitoring performance, reflecting and reviewing in order to achieve the desired outcome. When this is combined with other resilience habits such as healthy eating, it is especially useful for building resilience.



Chapter 3 – Methodology

Approval of Ethics Confirmation



Ref: FoB/UPC/FREC/FREC1516.55
Date: 28 June, 2016

Dear Alison

Ethical Approval Application No: FREC1516.55

Title: How does Coaching create change in the Mental Well-being of the Adult Working Population

The Faculty Research Ethics Committee has considered the ethical approval form and is fully satisfied that the project complies with Plymouth University's ethical standards for research involving human participants.

Approval is for the duration of the project. However, please resubmit your application to the committee if the information provided in the form alters or is likely to alter significantly.

We would like to wish you good luck with your research project.

Yours sincerely

(Sent as email attachment)

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Questions from the National Accounts of Wellbeing Survey

Coaching for Wellbeing Survey

Welcome to the Coaching for Wellbeing survey, over the next few pages you will find some questions about your life and wellbeing. By completing this survey we are able to build up a picture of your personal wellbeing.

Please note this survey forms part of a PhD looking at the impact of coaching on mental wellbeing. The survey is confidential, however, by completing this survey you agree that your data may be used as part of that research. If you withdraw from the research your data will be deleted. The survey is provided courtesy of the New Economics Foundation - National Accounts of Wellbeing.

You will be provided with a summary report of your answers. If you have any questions about the research please contact: Alison Sydenham: info@coachingforwellbeing.org

First some questions about your life as a whole and your contact with others.

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1* On a scale of 1-10 where 10 is extremely satisfied and 0 is extremely dissatisfied - All things considered, how satisfied are you with life as a whole nowadays?

- ☐ Extremely dissatisfied - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ Extremely satisfied - 10
- ☐ Don't Know

2* How often do you meet socially with friends, relatives or colleagues?

- ☐ Never
- ☐ less than once a month
- ☐ once a month
- ☐ several times a month
- ☐ once a week
- ☐ several times a week
- ☐ every day
- ☐ don't know

3* Do you have anyone with whom you can discuss intimate and personal matters?

- ☐ Yes
- ☐ No
- ☐ Don't know

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4* How is your health in general?

- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Bad
- ☐ Very bad
- ☐ Don't know

5* Taking all things together, how happy would you say you are?

- ☐ Extremely unhappy - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ Extremely happy - 10

Please say how much you agree or disagree with each of the following statements:

6* I'm always optimistic about my future.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

7* In general I feel very positive about myself.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

8* At times I feel as if I am a failure.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

9* On the whole my life is close to how I would like it to be.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

These questions ask about how you have felt during the past week.

10* How much of the time during the past week have you felt depressed?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

11* How much of the time during the past week have you felt that everything you did was an effort?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

12* How much of the time during the past week has your sleep been restless?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

13* How much of the time during the past week were you happy?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

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14* How much of the time during the past week have you felt lonely?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

15* How much of the time during the past week have you enjoyed life?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

16* How much of the time during the past week have you felt sad?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

17* How much of the time during the past week could you not get going?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

Your week (continued)

A few more questions about how you have felt during the past week.

18* How much of the time during the past week have you had a lot of energy?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

19* How much of the time during the past week have you felt tired?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

20* How much of the time during the past week have you been absorbed in what you were doing?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

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21* How much of the time during the past week have you felt bored?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

22* How much of the time during the past week have you felt rested when you woke up in the morning?

- ☐ None or almost none of the time
- ☐ Some of the time
- ☐ Most of the time
- ☐ All or almost all of the time
- ☐ Don't know

Please indicate to what extent you agree or disagree with each of the following statements.

23* I feel I am free to decide how to live my life.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

24* In my daily life, I seldom have time to do the things I really enjoy.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

25* In my daily life, I get very little chance to show how capable I am.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

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26* Most days, I feel a sense of accomplishment from what I do.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

27* When things go wrong in my life, it generally takes me a long time to get back to normal.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

28* My life involves a lot of physical activity.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

Choose the point on the scale which best represents your view on each of the following.

29* On a scale of 0-10 where 10 is extremely satisfied and 0 is extremely dissatisfied, how satisfied are you with how your life has turned out so far?

- ☐ Extremely dissatisfied - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ Extremely satisfied - 10
- ☐ Don't know

30* How satisfied are you with your present standard of living?

- ☐ Extremely dissatisfied - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ Extremely satisfied - 10
- ☐ Don't know

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31* Most people can be trusted, or your can't be too careful?

- ☐ Can't be too careful - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ Most people can be trusted - 10
- ☐ Don't know

32* How much of the time spent with your immediate family is enjoyable?

- ☐ None of the time - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ All of the time - 6
- ☐ Don't know

33* How much of the time spent with your immediate family is stressful?

- ☐ None of the time - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ All of the time - 6
- ☐ Don't know

Please say how far the following apply to you

34* To what extent do you get a chance to learn new things?

- ☐ Not at all - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ A great deal - 6
- ☐ Don't know

35* To what extent do you feel that people in your local area help one another?

- ☐ Not at all - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ A great deal - 6
- ☐ Don't know

36* To what extent do you feel that people treat you with respect?

- ☐ Not at all - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ A great deal - 6
- ☐ Don't know

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37* To what extent do you feel that people treat you unfairly?

- ☐ Not at all - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ A great deal - 6
- ☐ Don't know

38* To what extent do you feel that you get the recognition you deserve for what you do?

- ☐ Not at all - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ A great deal - 6
- ☐ Don't know

Please say to what extent you agree or disagree with each of the following statements.

39* I generally feel that what I do in my life is valuable and worthwhile.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

40* There are people in my life who really care about me.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

41* I feel close to the people in my local area.

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

Work

Now some questions about any paid work you may do.

42* Are you currently in paid work of any kind?

- ☐ Yes
- ☐ No

43* All things considered, how satisfied are you with your present job?

- ☐ Extremely dissatisfied - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ Extremely satisfied - 10
- ☐ Don't know

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44* How satisfied are you with the balance between the time you spend on your paid work and the time you spend on other aspects of your life?

- ☐ Extremely dissatisfied - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ Extremely satisfied - 10
- ☐ Don't know

45* How much of the time do you find your job interesting?

- ☐ None of the time - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ All of the time - 6
- ☐ Don't know

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46* How much of the time do you find your job stressful?

- ☐ None of the time - 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ All of the time - 6
- ☐ Don't know

47* How likely would you say it is that you will become unemployed in the next 12 months?

- ☐ Very likely
- ☐ Likely
- ☐ Not very likely
- ☐ Not at all likely
- ☐ Don't know

48* Considering all my efforts and achievements in my job, I feel I get paid appropriately?

- ☐ Agree strongly
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly
- ☐ Don't know

About you

These are a few questions about you. All answers given will be kept confidential and used anonymously within the research.

49 What is your Nationality?

☐ British

☐ Other (Please Specify)

50* Your sex

☐ Male

☐ Female

51* What age are you?

☐ Under 18 years

☐ 18-25 years

☐ 26-35 years

☐ 36-45 years

☐ 46-55 years

☐ 56-65 years

☐ 65 or above

52* How many hours do you work in a typical week?

53 What is your Income band?

☐ Under £6000

☐ £6000 to under £12000

☐ £12000 to under £18000

☐ £18000 to under £24000

☐ £24000 to under £36000

☐ £36000 to under £60000

☐ prefer not to say

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54* What level is your main role within the Organisation?

- ☐ Senior Leadership Team ☐ Senior Manager ☐ Middle Manager
☐ Supervisor ☐ Non-supervisory
☐ Other (Please Specify)

55* Have you received coaching previously?

- ☐ yes ☐ no

56 If you have received coaching previously, how many sessions have you undertaken during the past 12 months?

57* If you have received coaching previously, what type of coaching have you received?

- ☐ Work-related coaching ☐ Life coaching ☐ work-related and life coaching
☐ I haven't received coaching previously
☐ Other (Please Specify)

58* Are you currently working or volunteering as a Coach? (please tick all that apply)

- ☐ Working as a Coach (paid) ☐ Volunteering as a Coach (unpaid) ☐ I am not currently working or volunteering as a Coach

Other (Please Specify)

59* Do you manage people within your role in the Organisation?

- ☐ Yes ☐ No

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60 If you answered yes to Q59, do you coach people within your role as a manager?

☐

Yes

☐

No

61 How long have you been a Coach?

☐

Less than 1 year

☐

1-2 years

☐

3-5 years

☐

6-10 years

☐

11-15 years

☐

16-20 years

☐

more than 20 years

62* Approximately how many coaching clients have you had?

☐

0

☐

1-10

☐

11-25

☐

26-50

☐

51-100

☐

more than 100

63* Approximately how many coaching hours have you completed?

☐

0

☐

1-20 hours

☐

21-50 hours

☐

51-100 hours

☐

101-500 hours

☐

501-1000 hours

☐

1001-2500 hours

☐

more than 2500 hours

64* What coaching-related qualifications do you hold?

65* Where do your coaching clients come from? (Please tick all that apply)

☐

Within the Organisation

☐

Outside of the Organisation
(coaching swaps)

☐

Private clients external to the
Organisation

☐

I haven't had any coaching clients

Other (Please Specify)

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66* Please enter your full name (in order for your results to be returned to you)

67* Please enter your email address

68* It would be helpful to our research if you would be willing to be contacted in the future to complete this survey again and see how your results have changed. Please click yes if you would be willing to be contacted in the future.

☐ Yes

☐ No

Semi-structured interview questions

Interviews with Coaches

Explain basic structure: this is about:

- *Your perception of any changes to your mental wellbeing;*
- *Your perception of any changes to mental wellbeing of the people you coach;*
- *Your overall perception of coaching and its impact on mental wellbeing*

ABOUT YOU

1. Do you think there have been any changes to your mental wellbeing over the past 6 months, if so how?
2. At the start of the programme you said... about how you would measure your outcomes from coaching. Where are you now with regard to this outcome?
3. On a scale of 1-10 where 10 means you feel you have complete mental wellbeing in your life and 1 means you have none, where are you on the scale now?
4. Repeat wheel of coaching, scores/10
5. Self-awareness has been cited throughout the programme as an important theme in contributing towards our mental wellbeing. What (if anything) has helped you to raise your self-awareness during the coaching programme (coaching, training, self-reflection)?
6. Since undertaking the coaching programme, what are you now doing to manage your own mental wellbeing?

THE IMPACT OF COACHING ON OTHERS

7. What did you notice about any changes to the mental wellbeing of the people you coached?
8. How do you feel when you coach others?
9. What impact (if any) do you think being a Coach has on your mental wellbeing?

YOUR PERCEPTION OF COACHING

10. What impact (if any) do you think being coached has had on your mental wellbeing?
11. What aspects of the coaching programme (if any) had an impact on mental wellbeing (yours or the people you coach)?
positive / negative / no impact
(Goals, values, beliefs, self-awareness, responsibility, emotional wellbeing, thought recognition, clean feedback, training, support with co-coaching, questionnaire) prompt if needed.
12. How would you rate the effectiveness of your coach? What did you/did you not find helpful?
13. What contribution do you think coaching can offer for supporting mental wellbeing?
14. If you wanted to improve your mental wellbeing, would you choose coaching? Why?
15. Is there anything else you would like to add?
16. Release results... What do you notice about your new wellbeing score? What do you think contributed towards this result (inside or outside of the coaching programme)? (mitigating factors)

Interviews with Coachees

Explain about the interview, what it will be covering, that I am researching the impact of coaching on mental wellbeing and am carrying out interviews with people who have been coached through [REDACTED] and who agreed to participate in the research.

Definition of mental wellbeing: feeling good and functioning positively within an environment where they can flourish and achieve their full potential, vitality and sense of purpose in society.

About you and your mental wellbeing

1. What was your reason for seeking coaching? How effective would you say the coaching was in helping you achieve your outcomes?
2. Were you specifically looking to change your mental wellbeing?
3. Do you think there have been any changes to your mental wellbeing over the past 6 months, if so how?
4. Outside of coaching, what has happened over the past 6 months that may have impacted positively/negatively on your wellbeing?
5. On a scale of 1-10 where 10 means you feel you have complete mental wellbeing in your life and 1 means you have none, where are you on the scale now
6. How do you manage your mental wellbeing? Is this different since undertaking coaching?

Your perception of coaching

7. What impact (if any) do you think being coached has had on your mental wellbeing?
8. What impact (if any) do you think being coached has had on your self awareness?
9. From the coaching sessions, what aspects (if any) had any impact on your mental wellbeing? (Emotions/goals based?)
10. How would you rate the effectiveness of your coach? What did you/did you not find helpful?
11. What contribution do you think coaching can offer for supporting mental wellbeing?
12. If you wanted to improve your mental wellbeing, would you choose coaching? Why?
13. Is there anything else you would like to add?
14. Release results... What do you notice about your new wellbeing score? What do you think contributed towards this result (inside or outside of the coaching)?

Group Discussions/Focus Group

In small groups, you will be given one of the following questions to discuss. Write your thoughts on a piece of flipchart and you will then be asked to share your learning with the group. Please feel free to use the questions as prompts to explore further.

Please note this will form part of the PhD research and will be recorded.

1.Has coaching had an impact on your mental wellbeing? What changes have you noticed? Why do you think it had this impact?

2.Within the coaching programme we have covered coaching skills focused on the following topics: Goals, values, beliefs, self-awareness, responsibility, emotional wellbeing, thought recognition, clean feedback,

What impact have these had on your mental wellbeing and those of the people you coach?

What else has impacted your mental wellbeing?

3.In what way do you positively/negatively influence your own mental wellbeing?

Has attendance on this coaching programme changed this? If so, how?

4. What contribution do you think coaching can offer for improving mental wellbeing at work?

Why would you /would you not choose coaching to assist mental wellbeing at work?

Participant Recruitment letter (sent via internal contact)

Dear Coaches

We are delighted to be able to offer you the opportunity to participate in a Coaching for Wellbeing Programme, as a coachee. We hope that this will be beneficial to you personally, as well as giving you vital skills to use in your coaching with others. Please see the attached handout for further details.

Coaching for Wellbeing is particularly beneficial at a time of organisational change, so that you can use the skills to coach:

- Employees experiencing change of work, including different job roles and those at risk of redundancy*
- Unpaid carers, who wish to return to work*
- Care leavers, who are seeking work (Proposed programme - subject to confirmation).*

Alison Sydenham, experienced coach and trainer, is offering this programme to 15 participants, free of charge, providing you agree to take part in her evaluation of the programme. Alison is currently doing a PhD in Coaching and Wellbeing and the results of this programme will inform her research.

You will need to speak to your line manager to get permission to attend or alternatively, you may wish to attend in non-working time (e.g. if you work part-time, or take flexi or annual leave to attend).

The commitment is 2 full days and 3 x 2 hour sessions on the following days:

Thursday 24th November 2016 from 9.30 am – 4.30 pm, (Full day. Tea and coffee provided. Please bring a packed lunch.)

Tuesday 10th January 2017 from 9.30 am – 11.30 am, (Co-coaching. Tea and coffee provided.).

Thursday 9th February 2017 from 9.30 am – 11.30 am, (Co-coaching. Tea and coffee provided.)

Thursday 9th March 2017 from 9.30 am – 11.30 am, (Co-coaching. Tea and coffee provided.)

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Wednesday 19th April 2017 from 9:30 am – 4.30 pm, (Full day. Tea and coffee provided. Please bring a packed lunch.)

If we are over subscribed, priority will be given to those who can attend all 5 sessions and to coaches who have signed up or completed ILM5 in Coaching.

If you are unable to attend, we would be delighted if you could be part of Alison's "control" group and complete a couple of wellbeing evaluations, so that Alison can compare results with those who have completed the programme.

Please could you let me know by Friday 4th November if you would like to take part in the programme. If you are unable to take part, would you be willing to complete a couple of evaluations, as part of the "control" group?

If you have any questions, please do contact [REDACTED]

Many thanks

Participant Information Sheet

Research Title

“How can coaching create change in the mental well-being of the adult working population?”

Description of project

Over the past decade, workplace coaching has grown from a novel intervention to a mainstream developmental activity worldwide (Grant et al. 2010). Although coaching focuses predominantly on individual and/or organisational change, its benefits have indicated that coaching can improve workplace stress reduction (Wright, 2007), goal attainment, reduce anxiety and stress (Grant, 2003), (Green, Grant and Rynsaardt, 2007). There is also evidence around the value of coaching for proactively improving wellbeing: enhancing psychological and subjective well-being (Green, Oades and Grant, 2006); (Spence and Grant, 2007), improving resilience. (Grant et al. 2009) and enhancing the general well-being of employees (Duijts et al. 2008).

This project aims to understand the evidence base around coaching for improving workplace wellbeing and demonstrate how coaching can be utilised to create sustainable workplace wellbeing.

Timeline

Literature Review 2015-16

Primary Research July 2016 - July 2017

Analysis of results 2017

Writing up 2016-18

Research Outline

Phase 1 – Enrolment on 6 month coaching programme (minimum 10 participants). Participants to record wellbeing scores at the beginning and end of the programme and take part in qualitative research methods to explore why and how coaching works.

Phase 2 – Qualified Coaches to complete 6 month coaching programme (as above). They will then be supported in implementing wellbeing coaching to subsequent coachee's, the results of which will be measured using the National Accounts of Wellbeing survey.

Phase 3 – Analysis of c500 coaching questionnaires to establish the impact of coaching on personal effectiveness.

Research Opportunity

Would you like to create sustainable wellbeing within your Organisation? Alison Sydenham, a PhD student at Plymouth University is undertaking research into how coaching creates change in the mental wellbeing of the adult working population. As part of her research, she is seeking to work with Organisations who can support her by enrolling a minimum of 10 people onto a 6-month coaching programme.

6 month coaching programme including:

- 2 training days
- 3 coaching sessions
- Blended learning e-course

Aim

Delegates will recognise, understand and begin to take control of their stress levels, encouraging them to seek pro-active ways of reducing stress and improving their wellbeing. Delegates will then be supported in applying their learning to the workplace and feel competent to support those they manage in improving their wellbeing.

Objectives

- Recognise and understand what is stress and how it impacts on our day-to-day health and productivity;
- Preventing stress from becoming ill-health;
- To understand what wellbeing is and how we can take responsibility for our own wellbeing;
- To understand and implement the Wellbeing Coaching Model and other models of stress and wellbeing;
- To understand Coaching and its role in enhancing our wellbeing;
- Understand what are our stress triggers and how to overcome them;
- Identify personal actions to improve our wellbeing;
- Understand and begin to implement changes within the workplace to take control of managing stress within your teams;

Endorsements

I am very happy to recommend Aleigh's programme to you. She is a highly professional, skilled coach who is conducting research which will be of real benefit to the understanding and practice of coaching and wellbeing thereby improving the quality of working lives.

Beryl Badger - Retired from Plymouth University but still active in HR.

Frequently Asked Questions

What is required of the Organisation?

In our experience, engagement with the programme is increased when participants are invited to attend (rather than mandated). It is helpful if the Organisation can promote the opportunity and assist with the recruitment of a minimum of 10 participants.

Once the programme is set up, communication can be carried out via an Organisation point of contact, or directly from the Coach/Researcher.

If you have the facilities, the programme is usually carried out in a meeting room on site therefore we are grateful if you can arrange to book the training space and refreshments for the delegates.

What is the cost?

As this is a non-sponsored research programme, a financial contribution towards the running costs would be appreciated.

What can we expect in return?

Whilst we cannot guarantee the results, our trial studies have resulted in 100% improvement in wellbeing. This will have significant potential benefits including: reduced sickness absence, increased engagement, increased productivity, reduced labour turnover, reduced insurance costs, reduced presenteeism, increased candidate attraction. This is in addition to contributing to your Corporate Social Responsibility and partnership with PhD research. If you have any of your own measurements you would like us to incorporate we are more than happy to discuss this with you.

What is required of the participants?

Attendance on the full programme is appreciated (although please note the question below if a participant wishes to withdraw). The full programme includes 2 training days, 3 coaching sessions and a blended learning e-course.

As part of the research, participants are politely requested to take part in the National Accounts of Wellbeing survey. This is a 50 item questionnaire which assesses their wellbeing. It is submitted before the programme starts, at the end of the programme and 6 months following the end of the programme.

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It will also greatly be appreciated if participants would take part in an interview following the final coaching session which will enable us to gather rich data into the effectiveness of the coaching (this is voluntary).

In order to fully benefit from the coaching sessions, participants will be sent a pre-coaching questionnaire to complete prior to the coaching sessions, this is a short form and helps to guide what they want to cover during the coaching session.

What about confidentiality?

All coaching sessions are confidential and the results will be anonymised within the research. The pre-coaching questionnaires may also form part of the research analysis, but again, these will be anonymised. A summary report may be created for the Organisation, however, this will include a summary of the data, not including any personal details or data which would identify the participant.

The only exception to this is if a participant discloses information which puts either themselves or someone else at risk of danger, this information will be disclosed as part of our health and safety responsibilities.

Can I pull out?

Yes, if you choose not to continue the programme your recorded results will be deleted. We however, ask participants to consider their commitment to the full programme at the start in order to ensure the research is able to be viable.

Further questions?

If you have further questions about the course design and participation, please contact: Alison Sydenham: info@coachingforwellbeing.org or call [REDACTED]

If you have questions about research ethics, confidentiality or guiding principles, please contact the PhD Supervisor: Dr. Smita Tripathi: smita.tripathi@plymouth.ac.uk

Participant Consent

I agree to undertake a coaching programme and develop my skills between sessions with my designated coach.

I agree to take part in Phase 1/Phase 2 research as outlined in the participant information (attached).

I understand that coaching sessions are confidential and only information where stated in advance will be used as part of the research data.

I understand and give permission for my data recorded as part of the coaching programme to be used for the purpose of the PhD study and I understand that a report of all participant data in my Organisation may be reported back to my Organisation in terms of an anonymised report.

I understand that my details will be held securely in accordance with the Data Protection Act 1998 and that all information will be confidential unless specified otherwise.

I understand that the coaching is intended to support me in obtaining my personal/professional goals, and that my coach will maintain this boundary, or recommend I seek support from another professional, should I require counselling or other types of support.

I understand that I can withdraw from the programme/research by emailing Alison Sydenham: Alison.sydenham@plymouth.ac.uk and that my data will be destroyed within 7 days of receipt of the request.

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This research focuses on the impact of coaching on mental wellbeing, it is not intended to be a support programme for people with mental health condition.

I will disclose to the researcher on the above details, any diagnosed mental health condition (excluding stress) or any other health condition, which may restrict my full participation in the programme.

I understand and agree that in the event of my emotional or physical safety or the safety of others being at risk, my coach will support me by contacting the person named below.

My nominated contact is:.....

And can be contacted on:.....

Participant

name:.....

Organisation:

.....

Signed:

Date:

Researcher: Alison Sydenham.....

Signed: Alison Sydenham.....

Date: 13 November 2016.....

Programme Welcome Pack

Coaching for Wellbeing Programme

Dear Participant,

I am delighted that you have booked to take part in the Coaching for Wellbeing programme. The course will start on 24 November with the training day Thursday 24 November from 9:30-4:30pm, [REDACTED] (Full day. Tea and coffee provided. Please bring a packed lunch.)

During the six-month programme you will begin to understand your own stress triggers and learn how to combat these to achieve personal wellbeing. Stress is the number one reason for ill health and is on the increase. Health is no longer only about how well we eat and how much exercise we take. Wellbeing is now crucial to the ongoing mental, emotional and physical aspects of how we live our lives.

Aim

Delegates will recognise, understand and begin to take control of their stress levels, encouraging them to seek pro-active ways of reducing stress and improving their wellbeing. Delegates will then be supported in applying their learning to the workplace and feel competent and resilient to Coach others to take control of their stress levels.

The Programme Includes:

- 2 training days
- 3 co-coaching sessions
- On-line & email support
- Blended learning e-course
- Personalised Wellbeing Reports

Objectives

- Recognise and understand what is stress and how it impacts on our day-to-day health and productivity;
- Preventing stress from becoming ill-health;
- What is wellbeing and how we can take responsibility for our own wellbeing;
- To understand and implement the Wellbeing Coaching Model and other models on stress and wellbeing;
- To understand Coaching and its role in enhancing our wellbeing;
- Understand what are our stress triggers and how to overcome them;
- Identify personal actions to improve our wellbeing;
- Understand and begin to implement changes within the workplace to take control of managing stress within your teams;
- To equip you with the skills to Coach others using the Coaching for Wellbeing model.
- To understand the key role of the manager in maintaining a positive work environment.

Outline Programme 2016-17

- **Thursday 24 November 2016** from 9:30-4:30pm (Full day. Tea

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- and coffee provided. Please bring a packed lunch.)
- **Tuesday 10 January 2017** from 9:30- 11:30am (Co-coaching. Tea and coffee provided.).
- **Thursday 9 February 2017** from 9:30-11:30am, (Co-coaching. Tea and coffee provided.)
- **Thursday 9 March 2017** from 9:30-11:30am, (Co-coaching. Tea and coffee provided.)
- **Wednesday 19 April 2017** from 9:30-4:30pm, (Full day. Tea and coffee provided. Please bring a packed lunch.)
- **May 2017** follow-up research interview and feedback on personalized wellbeing report with programme leader Alison at a mutually convenient date, following the end of the programme.
- **November – May 2017** Personal study through Wellbeing Blended learning e-course.

Course Content 24 November 2016

9am	Arrival
9:30-10am	Welcome, introductions and outline of the day
10-10:30am	Recognising and understanding stress
1030-10:50am	BREAK
10:50-11:20am	What is wellbeing and how we can take responsibility for our own wellbeing
11:20 – 12:30am	Understanding Coaching and its role in enhancing wellbeing
12:30-1:30pm	LUNCH
1:30-3:15pm	The Wellbeing Coaching Model
3:15-3:30pm	BREAK
3:30-4pm	Understanding our stress triggers and how to overcome them
4-4:30pm	Wellbeing Action Plan

Course Content 19 April 2017

9:00am	Arrival
9:30am	Recap on what we have covered
9:45-10:45am	Focus Group – What have we learned?
10:45-11am	BREAK
11-11:30am	The wider context of wellbeing
11:30-12noon	Stress within teams
12noon-12:30	Self-Care for Coaches
12:30-1:30pm	LUNCH
1:30-2:00pm	Our role in maintaining a positive work environment
2:00-2:30pm	The role of our Organisation in promoting wellbeing
2:30-2:45pm	What to do when stress becomes ill-health

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2:45-3:00pm BREAK

3:00-3:45pm How to achieve resilience even when things get tough

3:45-4pm Wellbeing Action plans and course evaluation

4pm Finish

Co-Coaching Sessions January – March 2017

15min Coaching skills presentation

2 x 45min co-coaching sessions

15min feedback

Delivery style:

Our training is lively and participative so that people engage more and learn better. We provide an excellent knowledge and understanding of the subject, lots of practical tools and skills to use in the workplace, and most importantly, the confidence to put these into practice. Our training involves:



- Participation exercises to highlight the point or help people see the issue differently;

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- Facilitated discussions to introduce and explain theoretical models;
- Practical tasks to learn new skills in a safe environment with constructive feedback;
- Opportunities to reflect on the learning and how to apply it in the workplace.

Trainer: Aleigh Sydenham MA, MCIPD, APC (IIC&M), NLP Practitioner



Aleigh is passionate about helping and inspiring others to get the best from life by using Life Coaching and Neuro-Linguistic Programming (NLP) techniques.

With a Masters in Personnel and Development Aleigh has enjoyed an extensive career in Human Resources, working for South Devon NHS, Devon and Somerset Fire and Rescue Service, Plymouth University Business School as well for private and corporate clients based across Devon.

An accredited NLP Practitioner, Life Coach and Chartered Member of the CIPD, Aleigh utilises the philosophy, attitude and techniques of Coaching, NLP and Human Resources techniques to empower and support her clients in recognising and achieving their personal and professional goals whilst maintaining their wellbeing.

Aleigh has lived, worked and volunteered abroad as well as in the UK. She brings a broad perspective and vibrancy into her Coaching and Training through utilising her multi-cultural work experiences and knowledge. Aleigh exudes dependability and trust, inspiring confidence in those around her. As a Coach, she can offer dedication and support to help clients to become the best that they can be.

Aleigh believes that we all perform best when we are able to flourish and achieve our full potential for the benefit of ourselves, and our Organisation. She uses creative, enjoyable methods to make her training inclusive, relevant and inspiring, so that people participate more, learn better and are motivated to put their learning into practice.

How will the programme help me as a Coach?

The ethos of Coaching for Wellbeing is that improvements in wellbeing come from raising our awareness of what wellbeing looks and feels like personally, that in order to help other people to reduce stress levels and improve their wellbeing, you have to first understand about your own wellbeing. Therefore, this course will first and foremost assist you in improving your understanding of wellbeing, reducing stress while increasing your resilience.

You will then be taught coaching skills that will assist you in supporting the people you coach to improve their wellbeing. You will develop your knowledge of both goals-based and emotion-based coaching skills and learn how to implement the Coaching for Wellbeing coaching model.

During the Co-Coaching sessions you will practice coaching skills with each other that will deepen your knowledge as a Coach and give you an opportunity to reflect on your own wellbeing.

Finally, you will be supported in implementing the Coaching model and theories with the people you coach.

Note:

This programme is part of a PhD research study conducted through Plymouth University. By booking to take part in this programme, you agree to complete the whole programme and participate in the research aspects, which include completing 2 wellbeing surveys, a feedback session, and focus group plus any other research methods, which are agreed between the parties as mutually beneficial.

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In order to fully benefit from the coaching sessions, participants will be sent a pre-coaching questionnaire to complete, this is a short form and helps to guide what they want to cover during the coaching sessions. Your Coach will also complete a short evaluation at the end of each coaching session, a copy of which can be made available for you. Please note that the above research components will form part of the programme and therefore not cause you any additional commitment and are designed to contribute to your learning experience.

As part of the programme, we invite you to work with coachees using our Wellbeing survey. This will support you in demonstrating the improvement in the wellbeing of your coachees following coaching and will form an important part of the research process.

What about confidentiality?

All coaching sessions are confidential and the results will be anonymised within the research. The pre/post-coaching questionnaires may also form part of the research analysis, but again, these will be anonymised. A summary report may be created for the Organisation, however, this will include a summary of the data, not including any personal details or data which would identify the participant.

The only exception to this is if a participant discloses information which puts either themselves or someone else at risk of danger, this information will be disclosed as part of our health and safety responsibilities.

Can I pull out?

Yes, if you choose not to continue the programme your recorded results will be deleted. We however, ask participants to consider their commitment to the full programme at the start in order to ensure the research is able to be viable.

Endorsements

I am very happy to recommend Aleigh's programme to you. She is a highly professional, skilled coach who is conducting research which will be of real benefit to the understanding and practice of coaching and wellbeing thereby improving the quality of working lives. Beryl Badger

First Steps...

On the road to wellbeing, the first step is to begin to understand our own sense of wellbeing. Therefore, begin to notice your own levels of stress and wellbeing; what makes you feel good, and what makes you feel not so good. You are also required to complete a confidential wellbeing survey. The survey can be found at: [http://www.coachingforwellbeing.org/coaching-for-wellbeing/coaching-for-wellbeing-programme-2014-15/\(password: \[REDACTED\]\)](http://www.coachingforwellbeing.org/coaching-for-wellbeing/coaching-for-wellbeing-programme-2014-15/(password: [REDACTED])). Please complete the survey prior to the 24 November 2016. I look forward to seeing you on 24 November, if you have any questions in the meantime, please do not hesitate to contact me on the details below.

Yours faithfully,



Alison Sydenham

Further information:

Email: info@coachingforwellbeing.org

Phone: [REDACTED]

Process of Data analysis

Stage 1: Data collected from surveys

Stage 2: entered into SPSS

Stage 3: coded according to nominalised scores from NAWS (score = x)

Stage 4: data **standardised into a Z score** as follows: $z = (x - \text{mean}) / \text{SD}$

Stage 5: **aggregated** into wellbeing components and subcomponents as per the survey

Stage 6: Aggregated means calculated (z_i)

Stage 7: M and C scores taken from NAWS calculations, but otherwise calculated as:

$m_i = (\text{min} + \text{max}) / \text{Max} - \text{min}$ (minor discrepancy between the numbers possibly due to rounding of mean and SD scores provided)

Stage 8: Aggregated scores **transformed onto 0-10 scale** as follows: $t_i = (5 * z_i / (z_i * m_i + c_i)) + 5$

$C_i = (\text{min} * \text{Max} * 2) / (\text{min} - \text{max})$ (provided by NAWS)

Missing values replaced as mean score - A z score of "0" = $(\text{mean score} - \text{meanscore}) / \text{SD}$

Top level component scores calculated by taking the mean of the calculated T scores

Stage 8: statistical tests for "within subjects design"

Repeated Measure test across different areas completed (for charts)

Stage 9: Assumptions: Shapiro-wilk test of normality completed to ensure normally distributed;

Levene's test for Homogeneity of Variance

OneWay Anova of the mean difference calculated: The one-way analysis of variance (ANOVA)

is used to determine whether there are any statistically significant differences between the means of two or more independent (unrelated) groups

Stage 10: Post-Hoc tests used to identify where the groups differ from each other results analysed and reported

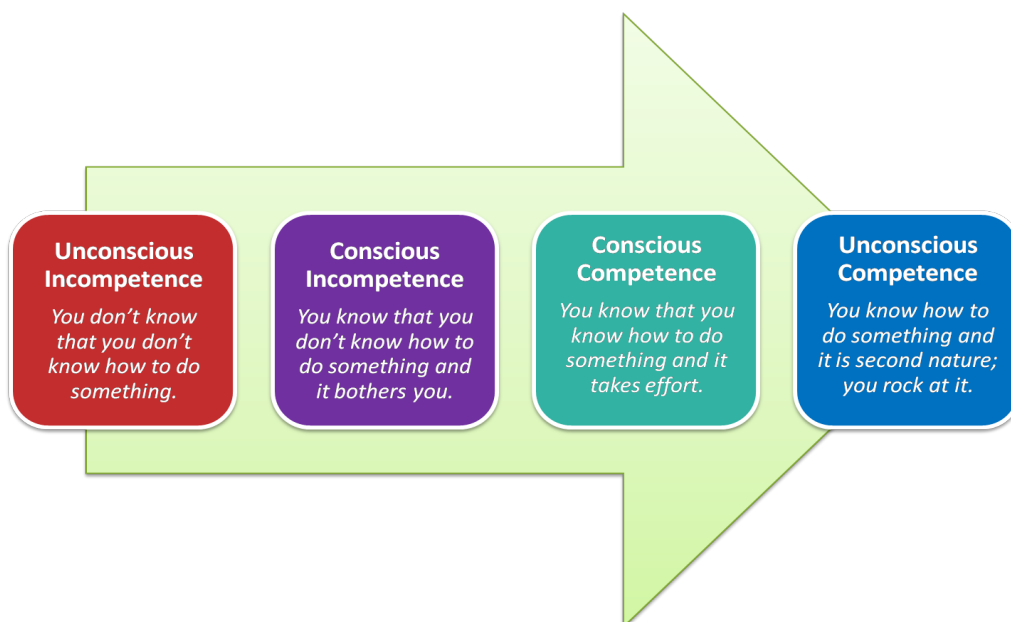
Additional Coaching models utilised in the programme

Responsibility, Self-Awareness and Questions - The Foundations of Coaching

Whitmore (1992) considered “**Building awareness, responsibility, and self belief** is the goal of a coach” (Whitmore, 1992, p. 18).

Self-awareness

Awareness comes from concentration, focused attention and clarity. We can raise our awareness by focusing our attention on something in order to gain clarity. Part of awareness is self-awareness and how our emotions and thoughts impact our perception of our wellbeing. It is perhaps best explained by the following model adapted from the conscious competence learning model:



The role of the Coach is to support Client's in raising their awareness so that they can see the situation more clearly and ultimately solve their own problems.

Perceptual Positions

This is an NLP model which is useful for situations where you need to see the broader perspective. For instance, if two or more employees are in a disagreement, this model can be utilised to open their thinking to see the other persons point of view.

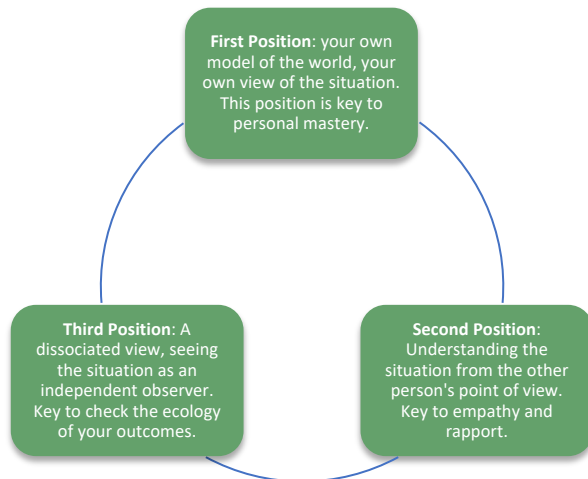
It is based on viewing the situation from three perspectives:

First position: Your own view point of what is happening. This is an important starting point to get clear on how you see things.

Second position: You then move to stand in “the other person’s shoes” and see the situation from their point of view. Use the language that they would use “as if you were them speaking”. For example, I feel... This position is key to building rapport and empathy with the other person’s point of view.

Third position: Here you take a dissociated view of the situation and see it as an independent observer. It is important to check what you have observed from the other two positions and take learning from them to shape your behaviour moving forwards. This is key to checking whether the outcomes from the situation are appropriate and whether there is anything else you may need to consider.

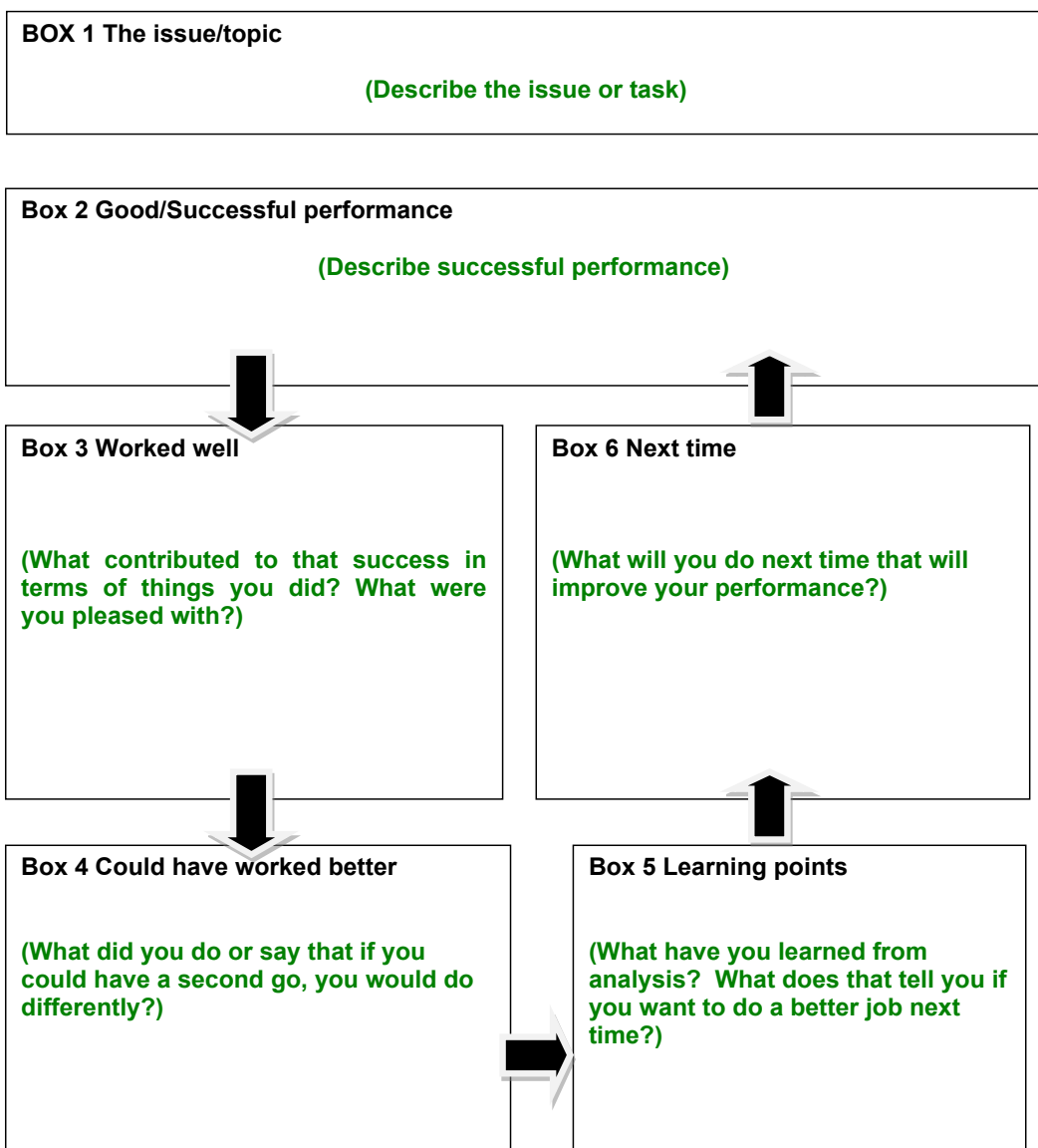
Once you have completed all three positions, you may want to return to some of them to see if your opinion has changed. Now return to your original position, how do you now see the situation?



Coaching circle



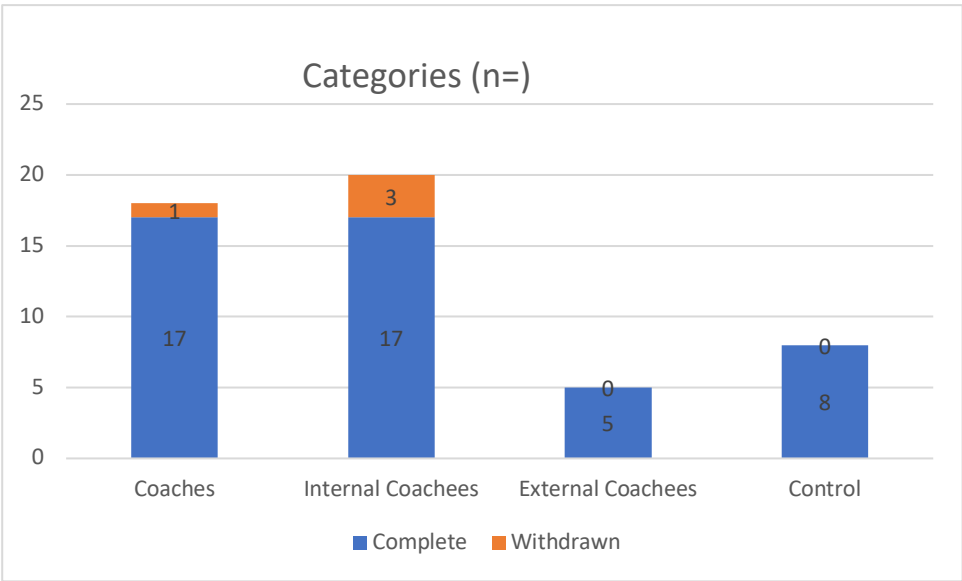
THE COACHING CIRCLE - Guidance



Chapter 4 – Findings

Demographic data

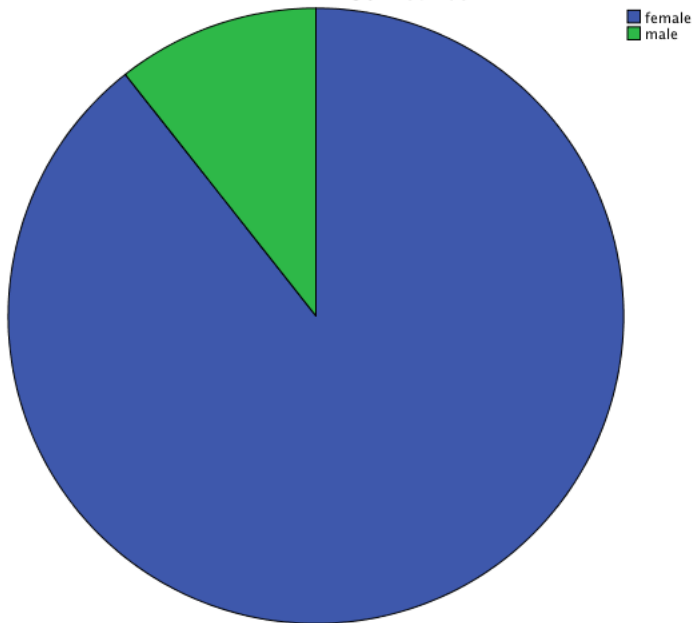
Participant categories



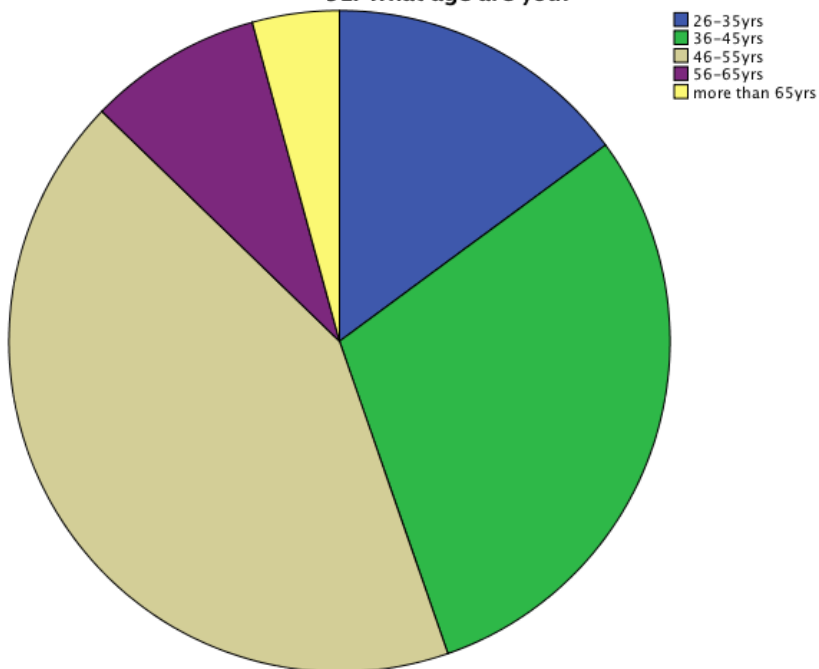
Employee flourishing: the application and efficacy of workplace coaching as a methodology for improving mental well-being

Gender and Age demographics

50. Your sex

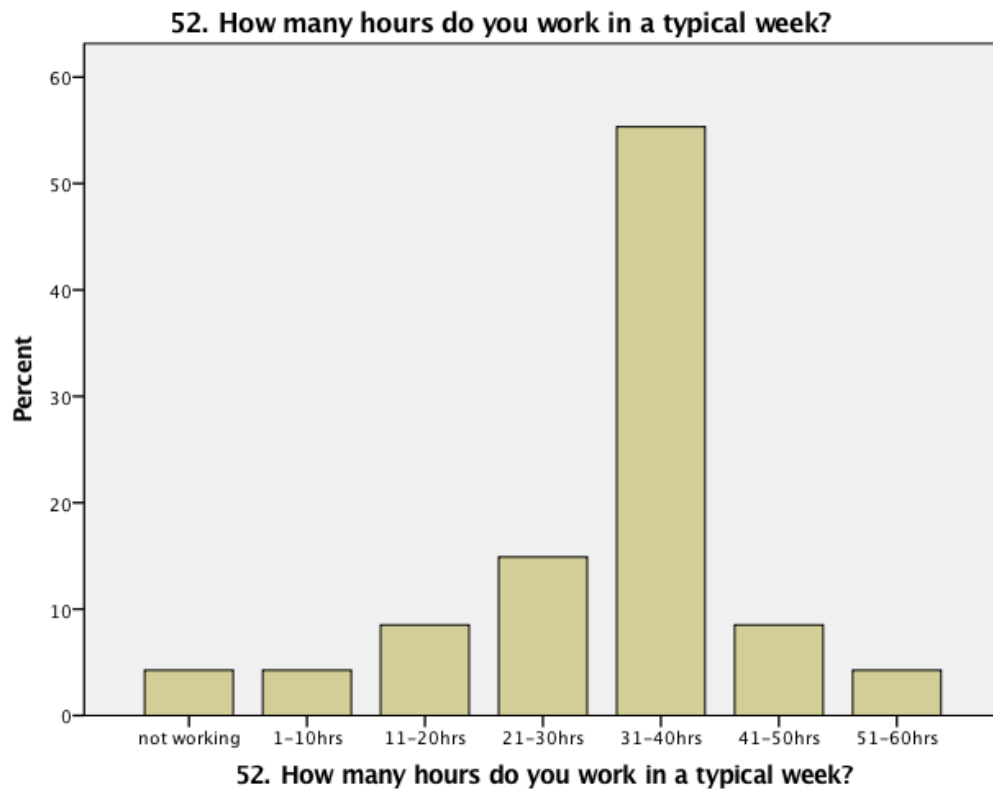


51. What age are you?

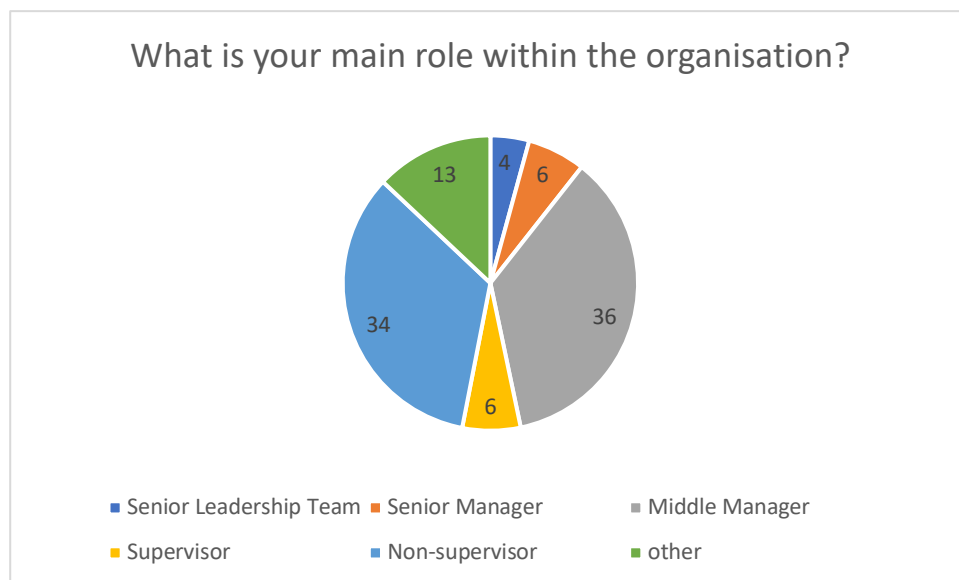


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Number of hours worked in a typical week



Participants' main role within the organisation

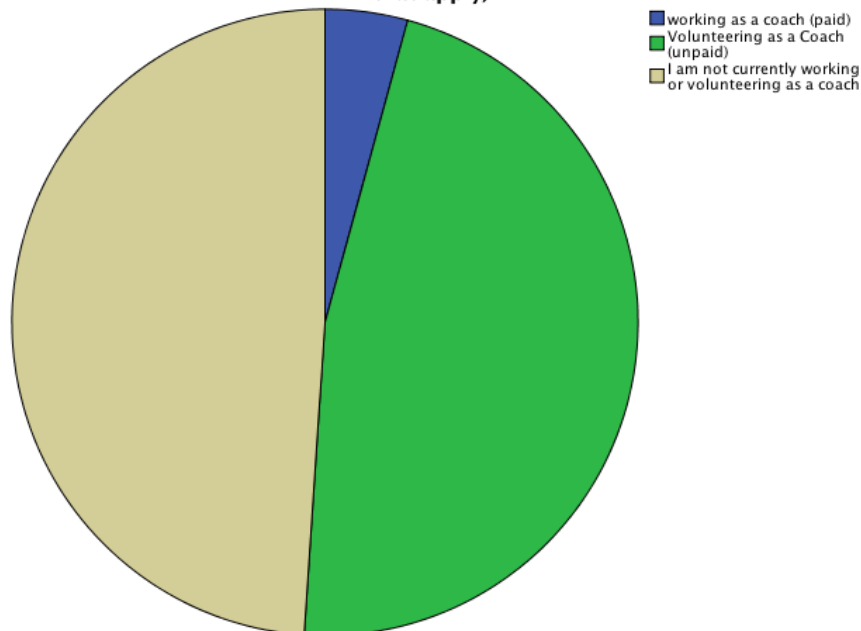


"Have you received coaching previously?"

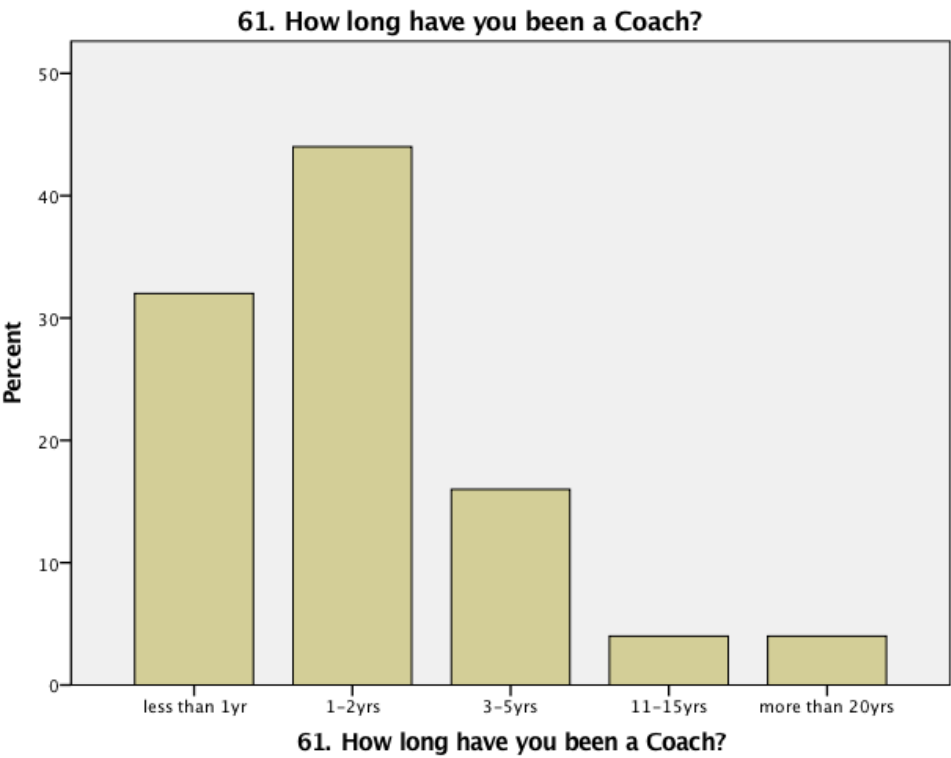


"Are you currently working or volunteering as a coach?"

58. Are you currently working or volunteering as a Coach? (please tick all that apply)



"How long have you been a coach?"



Parametric Tests of Normality

Tests of Normality

Shapiro-Wilk

Category		Shapiro-Wilk		
		Statistic	df	Sig.
TotalTscorediff	Control	0.938	8	0.589
	Private	0.884	5	0.328
	Coaches	0.950	17	0.453
	Coachees	0.950	17	0.453
SLTdiff	Control	0.828	8	0.057
	Private	0.750	5	0.030
	Coaches	0.964	17	0.708
	Coachees	0.941	17	0.330
SRTdiff	Control	0.912	8	0.369
	Private	0.948	5	0.726
	Coaches	0.963	17	0.697
	Coachees	0.986	17	0.992
VTdiff	Control	0.802	8	0.030
	Private	0.883	5	0.321
	Coaches	0.978	17	0.938
	Coachees	0.971	17	0.839
PfeelTdiff	Control	0.937	8	0.585
	Private	0.939	5	0.657
	Coaches	0.932	17	0.239
	Coachees	0.888	17	0.043

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AbnegfeelTdiff	Control	0.945	8	0.663
	Private	0.963	5	0.828
	Coaches	0.820	17	0.004
	Coachees	0.882	17	0.035
TBTdiff	Control	0.923	8	0.458
	Private	0.831	5	0.141
	Coaches	0.959	17	0.608
	Coachees	0.971	17	0.835
WTdiff	Control	0.910	8	0.352
	Private	0.813	5	0.103
	Coaches	0.959	17	0.615
	Coachees	0.942	17	0.339
RSETdiff	Control	0.932	8	0.530
	Private	0.974	5	0.899
	Coaches	0.975	17	0.901
	Coachees	0.910	17	0.101
PFuncdiff	Control	0.875	8	0.170
	Private	0.922	5	0.544
	Coaches	0.968	17	0.775
	Coachees	0.876	17	0.027
EWBdiff	Control	0.894	8	0.257
	Private	0.960	5	0.807
	Coaches	0.778	17	0.001
	Coachees	0.952	17	0.481
SETdiff	Control	0.906	8	0.330

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	Private	0.883	5	0.324
	Coaches	0.900	17	0.068
	Coachees	0.936	17	0.274
OptTdiff	Control	0.804	8	0.032
	Private	0.552	5	0.000
	Coaches	0.689	17	0.000
	Coachees	0.778	17	0.001
ResilienceTdiff	Control	0.872	8	0.156
	Private	0.902	5	0.421
	Coaches	0.839	17	0.007
	Coachees	0.800	17	0.002
CompTdiff	Control	0.889	8	0.229
	Private	0.918	5	0.519
	Coaches	0.953	17	0.503
	Coachees	0.920	17	0.150
AutTdiff	Control	0.923	8	0.452
	Private	0.946	5	0.712
	Coaches	0.956	17	0.559
	Coachees	0.914	17	0.119
EngTdiff	Control	0.939	8	0.599
	Private	0.970	5	0.876
	Coaches	0.912	17	0.107
	Coachees	0.901	17	0.071
MeaningTdiff	Control	0.841	8	0.078
	Private	0.920	5	0.528

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	Coaches	0.926	17	0.185
	Coachees	0.977	17	0.923
SocialWBdiff	Control	0.842	8	0.079
	Private	0.972	5	0.887
	Coaches	0.965	17	0.728
	Coachees	0.961	17	0.652
PersonalWBdiff	Control	0.978	8	0.951
	Private	0.859	5	0.224
	Coaches	0.970	17	0.819
	Coachees	0.955	17	0.548

Test of Homogeneity of Variances (Levene)

	Levene Statistic	df1	df2	Sig.
TotalTscorediff	0.396	3	43	0.757
SLTdiff	0.309	3	43	0.818
SRTdiff	0.628	3	43	0.601
VTdiff	1.478	3	43	0.234
PfeelTdiff	1.210	3	43	0.317
AbnegfeelTdiff	0.069	3	43	0.976
TBTdiff	0.282	3	43	0.838
WTdiff	0.742	3	43	0.533
RSETdiff	0.444	3	43	0.723
PFuncdiff	1.480	3	43	0.233

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EWBdiff	1.366	3	43	0.266
SETdiff	1.371	3	43	0.264
OptTdiff	1.459	3	43	0.239
ResilienceTdiff	1.193	3	43	0.324
CompTdiff	0.246	3	43	0.864
AutTdiff	1.953	3	43	0.135
EngTdiff	1.517	3	43	0.224
MeaningTdiff	2.349	3	43	0.086
SocialWBdiff	0.789	3	43	0.507
PersonalWBdiff	0.041	3	43	0.989

Therefore, groups combined to Participant/Control

Tests of Normality (Shapiro-Wilk)

Participant/Control		Shapiro-Wilk		
		Statistic	df	Sig.
TotalTscorediff	Participant	0.977	39	0.609
	Control	0.938	8	0.589
SLTdiff	Participant	0.987	39	0.930
	Control	0.828	8	0.057
SRTdiff	Participant	0.980	39	0.699
	Control	0.912	8	0.369
VTdiff	Participant	0.991	39	0.985
	Control	0.802	8	0.030
Pfeeltdiff	Participant	0.937	39	0.029
	Control	0.937	8	0.585
Abnegfeeltdiff	Participant	0.901	39	0.002
	Control	0.945	8	0.663
TBTdiff	Participant	0.987	39	0.929
	Control	0.923	8	0.458
WTdiff	Participant	0.969	39	0.340
	Control	0.910	8	0.352
RSETdiff	Participant	0.973	39	0.448
	Control	0.932	8	0.530
PFuncdiff	Participant	0.934	39	0.025
	Control	0.875	8	0.170
EWBdiff	Participant	0.974	39	0.508
	Control	0.894	8	0.257

SETdiff	Participant	0.925	39	0.013
	Control	0.906	8	0.330
OptTdiff	Participant	0.779	39	0.000
	Control	0.804	8	0.032
ResilienceTdiff	Participant	0.883	39	0.001
	Control	0.872	8	0.156
CompTdiff	Participant	0.963	39	0.219
	Control	0.889	8	0.229
AutTdiff	Participant	0.963	39	0.224
	Control	0.923	8	0.452
EngTdiff	Participant	0.935	39	0.027
	Control	0.939	8	0.599
MeaningTdiff	Participant	0.969	39	0.349
	Control	0.841	8	0.078
SocialWBdiff	Participant	0.976	39	0.550
	Control	0.842	8	0.079
PersonalWBdiff	Participant	0.984	39	0.854
	Control	0.978	8	0.951

*. This is a lower bound of the true significance.

a. Lilliefors Significance Correction

Non-Parametric Tests

Hypothesis Test Summary

	Null Hypothesis	Test	Sig.	Decision
1	The distribution of TotalTscorediff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.013 ¹	Reject the null hypothesis.
2	The distribution of SLTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.082 ¹	Retain the null hypothesis.
3	The distribution of SRTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.192 ¹	Retain the null hypothesis.
4	The distribution of VTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.024 ¹	Reject the null hypothesis.
5	The distribution of PfeelTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.016 ¹	Reject the null hypothesis.
6	The distribution of AbnegfeelTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.077 ¹	Retain the null hypothesis.
7	The distribution of TBTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.182 ¹	Retain the null hypothesis.
8	The distribution of WTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.588 ¹	Retain the null hypothesis.
9	The distribution of RSETdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.006 ¹	Reject the null hypothesis.
10	The distribution of PFuncdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.001 ¹	Reject the null hypothesis.
11	The distribution of EWBdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.006 ¹	Reject the null hypothesis.
12	The distribution of SETdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.478 ¹	Retain the null hypothesis.
13	The distribution of OptTdiff is the same across categories of Participant/Control.	Independent-Samples Mann-Whitney U Test	.321 ¹	Retain the null hypothesis.

Asymptotic significances are displayed. The significance level is .05.

¹ Exact significance is displayed for this test.

Summary (Participants and Control)

Wellbeing Category	Shapiro-Wilk test of normality	Levene's test	Significance One-way Anova	Kruskal-wallis H-test (non-parametric)
Total Wellbeing Score;	Yes	Yes	.005	.013 reject null hypothesis
Satisfying life	Yes	Yes	.063	.82
Supportive Relationships;	Yes	Yes	.170	.192
Vitality	No (Control .030)	Yes	.018	.024 reject null hypothesis
Positive feelings	No (Participant .029)	Yes	.012	.016 reject null hypothesis
Absence of negative feelings	No ([participant .002)	Yes	.063	.077
Trust and belonging;	Yes	Yes	.301	.182
Work;	Yes	Yes	.286	.588
Resilience and self esteem;	Yes	Yes	.005	.006

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Positive functioning	No (participant .025)	Yes	.003	.001 reject null hypothesis
Emotional Wellbeing;	Yes	Yes	.011	.006 reject null hypothesis
Self esteem	No (partivipant .013)	Yes	.218	.478
Optimism	No (participant 0.00 control .032)	Yes	.157	.321
Resilience	No (particiant .001)	Yes	.013	.019 reject null hypothesis
Competence	Yes	Yes	.065	.104
Autonomy;	Yes	Yes	.048	.033 reject null hypotheis
Engagement	No (participant .027)	Yes	.008	.013 reject null hypothesis
Meaning;	Yes	yes	.222	.245
Social Wellbeing;	Yes	Yes	.941	.901
Personal Wellbeing	Yes	Yes	.001	.002 reject null hypotheis

Summary (Coaches and Non-Coaches)

One particularly interesting result is that the Coaches wellbeing score was particularly high at the start of the coaching, the Anova results have therefore been re-run according to two groups:

Coaches and Non-coaches (this also passed the Levene test of homogeneity of variance)

Wellbeing Category	Shapiro-Wilk test of normality	Levene's test	Significance One-way Anova	Kruskal-wallis H-test (non-parametric)
Total score	Yes	Yes	.030	.067
SL	Yes	Yes	.010	.008
SR	Yes	Yes	.282	.249
Vitality	Yes	Yes	.062	.050
Pfeel	No, non-coach .033	Yes	.077	.300
Abnegfeel	No: coach .008; non-coach.057	Yes	.397	.583
TB	Yes	Yes	.206	.224
Work	Yes	Yes	.473	.159
RSE	Yes	Yes	.084	.091
PFunc	No: non-coach.015	Yes	.113	.159
EWB	Yes (.047)	Yes	.131	.343
SE	Yes	Yes	.157	.253
Opt	No: .001/.000	Yes	.464	.607
Resilience	No: .007/.004	Yes	.225	.303
Comp	Yes	Yes	.972	.914

Aut	Yes	Yes	.243	.231
Eng	Yes	Yes	.027	.038
Meaning	No: coach.018	Yes	.474	.313
SocialWB	Yes	Yes	.090	.077
PersonalWB	Yes	Yes	.014	.028

Chapter 5 – Discussion

n/a

Chapter 6 – Conclusion

n/a

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